TITLE 22 - CH 2

STATE OF CALIFORNIA
Sacramento

Inter-Departmental Communication

Date: January 3, 1949

TO: Hon. Frank M. Jordan
Secretary of State
Room 109, State Capitol
Sacramento, California

Subject:

FILED
in the office of the Secretary of State
of the State of California

JAN 3- 1949

At 4.00 o'clock P. M.

FRANK M. JORDAN, Secretary of State

By Robert V. Jordan
Assistant Secretary of State

FROM: Department of Social Welfare

Attached are three copies of the following:

Ratification and Adoption
of Rules and Regulations,
January 3, 1949

These rules and regulations were ratified and adopted pursuant to the powers vested in the Director of the State Department of Social Welfare by Section 4 of Article XXV of the Constitution of the State of California and are being filed in accordance with Section 11380 of the Government Code.

This material is to be effective immediately upon filing with the Secretary of State, since this has been found necessary for the immediate preservation of the public peace, health and safety or general welfare and that notice and public procedure thereon are impracticable, unnecessary or contrary to the public interest.

This ratification and adoption of rules and regulations was done by the Director of the State Department of Social Welfare on January 3, 1949.

Very sincerely yours,

Myrtle Williams

MYRTLE WILLIAMS, Director
Department of Social Welfare

468:e65
Attachments

2/44 43 10,000

FILED
in the office of the Secretary of State
of the State of California

JAN 3- 1949

At 4.00 o'clock P. M.

FRANK M. JORDAN, Secretary of State

By Robert Jordan
Assistant Secretary of State

RULE AND REGULATION

Pursuant to the authority vested in me by Section 4 of Article XXV of the Constitution of the State of California, I hereby adopt all rules and regulations heretofore adopted by the State Social Welfare Board and relating to Old Age Security and Security for the Blind as the same were in effect on December 31, 1948; including the form and method and manner of filing of the applications heretofore filed by all persons who were on December 31, 1948, eligible recipients of aid to the needy aged and aid to the needy blind under the provisions of the Welfare and Institutions Code in effect December 31, 1948.

I declare that these rules and regulations henceforth, and until repealed or amended by me, shall have the same force and effect as if they had been individually adopted by me.

* * * * * * * *

The foregoing rule and regulation is hereby declared to be an emergency regulation necessary for the immediate preservation of the public peace, health and safety, or general welfare within the meaning of Section 11421 of the Government Code, and shall therefore go into immediate effect. A statement of the facts constituting such necessity is as follows:

Pursuant to Section 9 of Article XXV of the Constitution, payments of Old Age Security and Security for the Blind "shall be mailed or disbursed on or before the first day of each month." Unless there be effective, as of today, rules and regulations implementing the provisions of the Constitution and the Welfare and Institutions Code, counties may be unable to make payments of security in accordance with agreements heretofore executed. Failure to pay security to those qualified to receive it would result in widespread misery and impairment of the public health and safety.

Notice and public procedure on the foregoing regulation, as required by Section 11423 of the Government Code, are impracticable and unnecessary.

Myrtle Williams

Myrtle Williams, Director
State Department of Social Welfare

TITLE 22-CH. 2

Certified as a Regulation (or Regulations) of the

Dept of Social Welfare

(Name of State Agency)

Myrtle Williams

(Signature)

Director

(Title)

1-7-49

(Date)

Title 22-CA 2

MAIN OFFICE
SACRAMENTO
616 K STREET
14

LOS ANGELES OFFICE
MIRROR BUILDING
145 SOUTH SPRING STREET
12

SAN FRANCISCO OFFICE
GRAYSTONE BUILDING
948 MARKET STREET
2

STATE OF CALIFORNIA

Department of Social Welfare

MYRTLE WILLIAMS
DIRECTOR

Sacramento 14
January 4, 1949

Hon. Frank M. Jordan
Secretary of State
Room 109, State Capitol
Sacramento, California

FILED
in the office of the Secretary of State
of the State of California

JAN 10 1949

At 1:45 o'clock P. M.
FRANK M. JORDAN, Secretary of State
By Robert T. Jordan
Assistant Secretary of State

IN REPLY PLEASE REFER TO:

My dear Mr. Jordan:

Attached are three copies of the regulations issued by the State Department of Social Welfare:

DEPARTMENT BULLETIN NO. 339
DEPARTMENT BULLETIN NO. 341

These regulations were issued by the State Department of Social Welfare pursuant to the powers conferred upon it by the Welfare and Institutions Code under Sections 115 and 116 and are being filed in accordance with Section 11380 of the Government Code.

These regulations are to be effective immediately upon filing with the Secretary of State, since this has been found necessary for the immediate preservation of the public peace, health and safety or general welfare and that notice and public procedure thereon are impracticable, unnecessary or contrary to the public interest.

Very sincerely yours,

Myrtle Williams

MYRTLE WILLIAMS, Director
Department of Social Welfare

468:b
Attachments

RECEIVED
SACRAMENTO, CALIF.
1949 JAN 7 PM 3 41
FRANK M. JORDAN
SECRETARY OF STATE
STATE OF CALIFORNIA

CHARLES M. WOLLENBERG
Director

204 C 115, 116

EARL WARREN
Governor

STATE OF CALIFORNIA
DEPARTMENT OF SOCIAL WELFARE
616 K STREET
SACRAMENTO 14

December 30, 1948

FILED
in the office of the Secretary of State
of the State of California

JAN 10 1949

At 1:45 o'clock P. M.
FRANK M. JORDAN, Secretary of State
By Robert T. Jordan
Assistant Secretary of State

DEPARTMENT BULLETIN NO. 339(Stat.)

TO: COUNTY BOARDS OF SUPERVISORS
COUNTY AUDITORS
COUNTY WELFARE DEPARTMENTS

Subject: Monthly Statistical Reports on Old Age Security, Security for the Blind, and Aid to Partially Self-supporting Blind Residents.

Forms Ag 237 and Bl 237, monthly statistical reports, have been revised and simplified, and provision has been made for reporting on APSB on a separate form, APSB 237. Beginning with the reports covering the month of January 1949 (due not later than February 8), monthly statistical reports shall be submitted on Form Ag 237 (Revised December 1948), Form Bl 237 (Revised December 1948), and Form APSB 237, on Old Age Security, Security for the Blind, and Aid to Partially Self-supporting Blind Residents, respectively, in accordance with attached instructions.

Instructions contained in Manual Section 510-00 through 563-54 are hereby canceled so far as they relate to Forms Ag 237 and Bl 237, but remain fully effective otherwise.

In respect to the application movement section (Section A) of all three reports, please note that restorations by means of a Notice of Change (Form Ag, Bl, and APSB 232) and inter-county transfers are no longer to be reported as applications but are to be added to the caseload by reporting in Item 8 and Item 9 respectively.

Provision has been made on Form Ag 237 (Revised December 1948) for reporting the number of pending OAS applications of persons less than 65 years of age and the number of OAS recipients less than 65 years of age.

Revised instructions and sample forms are attached to this bulletin. A supply of revised monthly statistical report forms are being mailed under separate cover.

Very sincerely yours,

Chas. M. Wollenberg

CHARLES M. WOLLENBERG, Director
Department of Social Welfare

Attachments

INSTRUCTIONS FOR COMPLETION OF MONTHLY STATISTICAL REPORT ON OLD AGE SECURITY - FORM AG-237 (REVISED DECEMBER 1948)

General

Monthly Statistical Reports on Old Age Security (Form Ag-237, Revised December 1948) shall be submitted to the State Department of Social Welfare by all counties every month.

Form Ag-237 (Revised December 1948) is to be used effective with the report covering the month of January 1949. Reports are due each month not later than the 8th of the month following the month covered by the report. A copy of the report should be retained by the county.

The monthly statistical report on OAS, Form Ag 237 (Revised December 1948), is designed to report applications and case movement and the obligations incurred for Old Age Security.

The report is divided into 4 sections:

A - Application Movement
B - Case Movement
C - Obligations Incurred
D - Recipients Under 65 years of age

Application disposals (Items 4, 4A, 4B, 4C, and 7), restorations (Item 8), transfers (Item 9), and discontinuances (Item 11) shall be reported for the month when such action was taken by the local Deputy Director SDSW rather than for the month in which the action becomes effective (if these months differ). The single exception to this rule is noted under Item 8.

Section A - Application Movement

This section is designed to report the movement of applications (Form Ag-200 or AB-200-B actually signed by the applicant or his authorized representative). Excluded from Section A are restorations authorized by means of a Notice of Change (Form Ag-232). These cases are to be reported under Item 8 of Section B. Also excluded from Section A, are transfers from another county even though a Form Ag-200 or AB-200-B may have been signed by the applicant or his authorized representative. These cases are to be reported under Item 9 of Section B.

Item 1. Applications Pending From Preceding Month - Enter the number of applications previously received which had not been disposed of by the end of the preceding month. This entry should agree with Item 5 of the previous month's report. If Item 5 of the previous month's report is found to be in error, then the correct figure should be shown in Item 1. An explanation of the difference should be made on the reverse side of the report form.

Item 2. Applications Received During Month - Enter the number of applications (Forms Ag-200 or AB-200-B) which have been signed during the month. Applications include:

(1) Applications signed by persons who have never previously applied for OAS.

(2) Applicati signed by persons who have pr usly applied but withdrew their applications or had their applications denied or canceled for some other reason.

(3) Reapplications (Form Ag-200 or AB-200-B signed by the applicant or his authorized representative by persons who are seeking restoration of OAS which was terminated 12 months or more prior to date of reapplication, or by persons who for some technical reason are required to sign an application form to effect a restoration of OAS.

(4) Applications made by authorized representative (Form AB-200-B). To avoid duplication exclude applications (Form Ag 200) subsequently signed by applicant.

Item 3. Total Applications During Month - Enter the sum of Items 1 and 2.

Item 4. Applications Disposed of During Month - Enter the total number of applications removed from the application count during the month because they were granted, denied, withdrawn, or canceled. Adjustments to correct errors in the application count are not to be made in this item but in Item 1. Item 4 is the sum of Items 4A, 4B, and 4C.

Item 4A. Applications Granted - Enter the number of applications for OAS granted by action of the local Deputy Director SDSW during the month.

Item 4B. Applications Denied - Enter the number of applications for OAS denied by action of the local Deputy Director SDSW during the month.

Item 4C. Applications Withdrawn or Canceled - Enter the total number of OAS applications withdrawn by applicants during the month or canceled because the applicants have died or their whereabouts are unknown. Adjustments to correct errors in the application count are not to be made in this item but in Item 1.

Item 5. Applications Pending at End of Month - Enter the number of applications on file on the last day of the month which are awaiting decision in respect to eligibility for OAS. This item is the sum of Items 5A and 5B.

Item 5A. Applications Pending for Persons 65 Years and Over - Enter the number of applications of persons aged 64 years and 10 months or over (on date of application) pending action on the last day of the month.

Item 5B. Applications Pending for Persons Under Age 65 Years - Enter the number of applications of persons less than 64 years and 10 months of age (on date of application) pending action on the last day of the month.

Section B - Cases

Item 6. Cases Continued from Preceding Month - Enter the number of authorized cases whose OAS had not been terminated by the end of the preceding month. This entry should agree with Item 12 of the preceding month's report. If Item 12 of the preceding month was found to be in error, the correct figure should be shown here (Item 6). An explanation of the difference should be made on the reverse side of the report.

Item 7. Applications Granted During the Month - Enter the figure shown in Item 4A.

Item 8. Cases stored During Month - Enter th umber of cases restored to OAS by action of the local Deputy Director SDSW on Notice of Change (Form Ag-232) during the month. Report restorations in the month in which action was taken by the local Deputy Director SDSW except when an automatic restoration is authorized at the time of discontinuance. In the latter case report the restoration in the month in which it becomes effective.

Item 9. Cases Transferred from Another County During Month - Enter the number of OAS cases for whom responsibility for payment was transferred from another county during the month.

Item 10. Total Cases Active During Month - Enter the sum of Items 6, 7, 8, and 9. This item is also the sum of Items 10A and 10B.

Item 10A. Warrant Issued - Enter the number of persons who received OAS during the month for this month. Exclude cases who did not receive OAS because their warrants for the month were not written or were canceled, "held", or suspended.

Item 10B. Warrant Not Issued - Enter the number of OAS cases to whom warrants were not issued during the month. Include cases for whom warrants were not written or whose warrants were canceled, "held", or suspended.

Item 11. Cases Discontinued During Month - Enter the number of cases whose OAS was terminated by action of the local Deputy Director SDSW on Notice of Change (Form Ag-232) during the month regardless of the effective date on the Notice of Change. Include cases for whom responsibility for payment was transferred to another county.

Item 12. Cases Continued to Next Month - Enter the number of cases which, on the last day of the month, appeared eligible for the next month's grant, or which have not been formally discontinued by action of the local Deputy Director SDSW. This count equals Item 10 minus Item 11.

Section C. - Obligations Incurred for OAS

This section is designed to report the amount of OAS paid to recipients during the month for that month and the amounts to be paid from Federal and State funds. Exclude retroactive payments and current warrants which were canceled, "held", or suspended. Any assistance from county General Relief funds to recipients of OAS shall be reported on Form GR-237.

Item 13. Total Obligations - Enter the total amount of OAS paid for the month being reported.

Item 13A. Federal Share - Enter the amount of OAS reported in Item 13 to be paid from Federal funds.

Item 13B. State Share - Enter the amount of OAS reported in Item 13 to be paid from State funds.

Section D. - Recipients Under 65 Years of Age Included in Item 10A

Enter the number of recipients included in Item 10A who were less than 65 years of age at the time the warrant was issued. Include all recipients who have not reached their 65th birthday. (Note that this differs from the definition in Item 5B.)

MONTHLY STATISTICAL REPORT ON OLD AGE SECURITY

COUNTY _____ REPORT FOR THE MONTH OF _____ 19 ____

SECTION A - APPLICATIONS:

1. Pending from preceding month (Item 5 last month) . . . . . _____
2. Received during month. . . . . _____
3. Total during month (Item 1 + 2). . . . . _____
4. Disposed of during month . . . . . _____
   a. Granted (Item 7) . . . . . _____
   b. Denied . . . . . _____
   c. Withdrawn or canceled. . . . . _____
5. Pending at end of month (Item 1 next month). . . . . _____
   a. 65 years and over (Include 64 years 10 months) . . . . _____
   b. Under 65 years (Exclude 64 years 10 months). . . . . _____

SECTION B - CASES:

6. Continued from preceding month (Item 12 last month). . . . _____
7. Applications granted during month (Item 4A). . . . . _____
8. Restored during month. . . . . _____
9. Transferred from another county during month . . . . . _____
10. Total active during month (Item 6 + 7 + 8 + 9) . . . . . _____
    a. Warrant issued . . . . . _____
    b. Warrant not issued . . . . . _____
11. Discontinued during month. . . . . _____
12. Continued to next month (Item 6 next month). . . . . _____

SECTION C - OBLIGATIONS INCURRED:

13. Total. . . . . $ _____
    A. Federal share. . . . . $ _____
    B. State share. . . . . $ _____

SECTION D - RECIPIENTS UNDER 65 YEARS OF AGE:

14. Recipients under 65 years of age included in Item 10A. . . _____

(Signature of Reporting Officer) _____ (Title) _____

(Date) _____ 19 ____

Form Ag 237, Revised December 1948

INSTRUCTIONS FOR COMPLETION OF MONTHLY STATISTICAL REPORT ON SECURITY FOR THE BLIND - FORM BL-237 (REVISED DECEMBER 1948)

General

Monthly Statistical Reports on Security for the Blind (Form Bl-237, Revised December 1948) shall be submitted to the State Department of Social Welfare by all counties every month. Form Bl-237 (Revised December 1948) is to be used effective with the report covering the month of January 1949. Reports are due each month not later than the 8th of the month following the month covered by the report. A copy of the report should be retained by the county.

The monthly statistical report on Security for the Blind is designed to report applications and case movement and the obligations incurred for Security for the Blind.

The report is divided into 3 sections:

A - Application Movement
B - Case Movement
C - Obligations Incurred

Application disposals (Items 4, 4A, 4B, 4C, and 7), restorations (Item 8), transfers (Item 9), and discontinuances (Item 11) shall be reported for the month when such action was taken by the local Deputy Director SDSW rather than for the month in which the action becomes effective (if these months differ). The single exception to this rule is noted under Item 8.

Section A - Application Movement

This section is designed to report the movement of applications Form Bl-200 or AB-200-B actually signed by the applicant or his authorized representative. Excluded from Section A are restorations authorized by means of a Notice of Change (Form Bl-232). These cases are to be reported under Item 8 of Section B. Also excluded from Section A, are transfers from another county even though a Form Bl-200 or AB-200-B may have been signed by the applicant or his authorized representative. These cases are to be reported under Item 9 of Section B.

Item 1. Applications Pending From Preceding Month - Enter the number of applications previously received which had not been disposed of by the end of the preceding month. This entry should agree with Item 5 of the previous month's report. If Item 5 of the previous month's report is found to be in error, then the correct figure should be shown in Item 1. An explanation of the difference should be made on the reverse side of the report form.

Item 2. Applications Received During Month - Enter the number of applications (Form Bl-200 or AB-200-B) which have been signed during the month. Applications include:

(1) Applications signed by persons who have never previously applied for Security for the Blind (formerly ANB).

(2) Applications signed by persons who have previously applied but withdrew their applications, or had their applications denied or canceled for some other reason.

(3) Reapplicat s (Form APSB-200 signed by the lividual) by persons who are seeking restoration of APSB which was terminated 12 months or more prior to date of reapplication, or persons who for some technical reason are required to sign an application form to effect a restoration of their APSB.

(4) Reapplications (Form APSB-200 signed by the individual) from individuals who are receiving assistance under the Security for the Blind Program and who were transferred from APSB 12 months or more ago.

Item 3. Total Applications During Month - Enter the sum of Items 1 and 2.

Item 4. Applications Disposed of During Month - Enter here the total number of applications that have been removed from the application count during the month, because they were granted, denied, withdrawn or canceled. Adjustments to correct errors in the application count are not to be made in this item but in Item 1. Item 4 is the sum of Items 4A, 4B, and 4C.

Item 4A. Applications Granted - Enter here the number of applications for APSB that have been granted by action of the Board of Supervisors during the month.

Item 4B. Applications Denied - Enter here the number of applications for APSB denied by action of the Board of Supervisors during the month.

Item 4C. Applications Withdrawn or Canceled - Enter the total number of APSB applications withdrawn by the applicants during the month or canceled for some other reason, i.e., death or disappearance of applicant. Do not use this item to make adjustments in the application count; make any adjustment in Item 1.

Item 5. Applications Pending at End of Month - Enter here the number of applications on file on the last day of the month which are awaiting decision in respect to eligibility for APSB.

Section B - Case Movement

Item 6. Cases Continued from Preceding Month - Enter the number of authorized cases whose APSB had not been terminated by the end of the preceding month. This entry should agree with Item 12 of the preceding month's report. If Item 12 of the preceding month was found to be in error, the correct figure should be shown here (Item 6). An explanation of the difference should be made on the reverse side of the report.

Item 7. Applications Granted During the Month - Enter the figure shown in Item 4A.

Item 8. Cases Restored During Month - Enter the number of cases restored to APSB by action of the Board of Supervisors on Form APSB-232 during the month. Report restorations in the month in which action was taken by the Board of Supervisors except when an automatic restoration is authorized at the time of discontinuance. In the latter case report the restoration in the month in which it becomes effective.

Item 9. Cases Transferred from Another County During Month - Enter the number of APSB cases for whom responsibility for payment was transferred from another county during the month.

taken by the local Deputy Director SDSW except when an automatic restoration is authorized at the time of discontinuance. In the latter case, report the restoration in the month in which it becomes effective.

Item 9. Cases Transferred From Another County During Month - Enter the number of Security for the Blind cases for whom responsibility for payment was transferred from another county during the month.

Item 10. Total Cases Active During Month - Enter the sum of Items 6, 7, 8 and 9. This item is also the sum of Items 10A and 10B.

Item 10A. Warrant Issued - Enter the number of persons who received Security for the Blind during the month for this month. Exclude cases who did not receive Security for the Blind because their warrants for the month were not written or were canceled, "held," or suspended.

Item 10B. Warrant Not Issued - Enter the number of Security for the Blind cases to whom warrants were not issued during the month. Include cases for whom warrants were not written or whose warrants were canceled, "held," or suspended.

Item 11. Cases Discontinued During Month - Enter the number of cases whose Security for the Blind was terminated by action of the local Deputy Director SDSW on Notice of Change (Form B1-232) during the month regardless of the effective date on the Notice of Change. Include cases for whom responsibility for payment was transferred to other counties and to other types of public assistance.

Item 11A. Cases Discontinued - Transferred to APSB - Enter the number of cases whose Security for the Blind was terminated because the recipient was transferred to the APSB program.

Item 11B. Cases Discontinued for Other Reasons - Enter the number of cases whose Security for the Blind was terminated for some reason other than transfer to APSB.

Item 12. Cases Continued to Next Month - Enter the number of cases which on the last day of the month appeared eligible for the next month's grant, or which have not been formally discontinued by action of the local Deputy Director SDSW. This count equals Item 10 minus Item 11.

Section C. Obligations Incurred for Security for the Blind.

This section is designed to report the amount of Security for the Blind paid to recipients during the month for that month and the amounts to be paid from Federal and State funds. Exclude retroactive payments and current warrants which were canceled "held," or suspended. Any assistance from county General Relief funds to recipients of Security for the Blind shall be reported on Form GR-237.

Item 13. Total Obligations - Enter the total amount of Security for the Blind paid for the month being reported.

Item 13a. Federal Share - Enter the amount of Security for the Blind reported in Item 13 to be paid from Federal funds.

Item 13b. State Share - Enter the amount of Security for the Blind reported in Item 13 to be paid from State funds.

MONTHLY STATISTICAL REPORT ON SECURITY FOR THE BLIND

COUNTY_____ REPORT FOR THE MONTH OF_____ 19____

SECTION A - APPLICATIONS:

1. Pending from preceding month (Item 5 last month) . . . . . _____
2. Received during month. . . . . _____
3. Total during month (Item 1 + 2). . . . . _____
4. Disposed of during month . . . . . _____
   a. Granted (Item 7) . . . . . _____
   b. Denied . . . . . _____
   c. Withdrawn or canceled. . . . . _____
5. Pending at end of month (Item 1 next month). . . . . _____

SECTION B - CASES:

6. Continued from preceding month (Item 12 last month). . . . _____
7. Applications granted during month (Item 4A). . . . . _____
8. Restored during month. . . . . _____
9. Transferred from another county during month . . . . . _____
10. Total active during month (Item 6 + 7 + 8 + 9) . . . . . _____
    a. Warrant issued . . . . . _____
    b. Warrant not issued . . . . . _____
11. Discontinued during month. . . . . _____
    1. Transferred to Aid to Partially Self-supporting Blind. _____
    2. Other. . . . . _____
12. Continued to next month (Item 6 next month). . . . . _____

SECTION C - OBLIGATIONS INCURRED:

13. Total. . . . . $ _____
    a. Federal share. . . . . $ _____
    b. State share. . . . . $ _____

(Signature of Reporting Officer)_____ (Title)_____

(Date)_____ 19____

Form Bl 237, Revised December 1948

INSTRUCTION OR COMPLETION OF MONTHLY STATI CAL REPORT ON AID TO PARTIALLY SELF-SUPPORTING BLIND RESIDENTS - FORM APSB-237
(December 1948)

General

Monthly Statistical Reports on Aid to Partially Self-supporting Blind Residents (Form APSB-237, December 1948) shall be submitted each month to the State Department of Social Welfare by all counties having APSB applications or cases. Form APSB-237 (December 1948) is to be used effective with the report covering the month of January 1949. Reports are due each month not later than the 8th of the month following the month covered by the report. A copy of the report should be retained by the county.

The monthly ststistical report on Aid to Partially Self-supporting Blind Residents is designed to report applications and case movement and the obligations incurred for APSB.

The report is divided into 3 sections:

A - Application Movement
B - Case Movement
C - Obligations Incurred

Application disposals (Items 4, 4A, 4B, 4C, and 7), restorations (Item 8), transfers (Item 9), and discontinuances (Item 11) shall be reported for the month when such action was taken by the local Deputy Director SDSW rather than for the month in which the action becomes effective (if these months differ). The single exception to this rule is noted under Item 8.

Section A - Application Movement

This section is designed to report the movement of applications (Form APSB-200 actually signed by the applicant). Excluded from Section A are restorations authorized by means of a Notice of Change (Form APSB-232). These cases are to be reported under Item 8 of Section B. Also excluded from Section A, are transfers from another county even though a Form APSB-200 may have been signed by the applicant. These cases are reported under Item 9 of Section B.

Item 1. Applications Pending from Preceding Month - Enter the number of applications previously received which had not been disposed of by the end of the preceding month. This entry should agree with Item 5 of the previous month's report. If Item 5 of the previous month's report is found to be in error, then the correct figure should be shown in Item 1. An explanation of the difference should be made on the reverse side of the report form.

Item 2. Applications Received During Month - Enter the number of applications (Form APSB-200) which have been signed during the month.

Applications include:

(1) Applications signed by persons who have never previously applied for APSB.

(2) Applications signed by persons who have previously filed but withdrew their applications or had their applications denied or canceled for some other reason.

(3) Reapplicat s (Form B1-200 or AB-200-B sig by the applicant or his authorized representative) by persons who are seeking restoration of Security for the Blind (formerly ANB) which was terminated 12 months or more prior to date of reapplication, or by persons who for some technical reason are required to sign an application form to effect a restoration of their Security for the Blind (formerly ANB).

(4) Reapplications (Form B1-200 or AB-200-B signed by the applicant or his authorized representative) from individuals who are receiving assistance under the APSB program and who were transferred from Security for the Blind (formerly ANB).

(5) Applications made by authorized representative (Form AB-200-B). To avoid duplication exclude applications (Form B1-200) subsequently signed by applicant.

Item 3. Total Applications During Month - Enter the sum of Items 1 and 2.

Item 4. Applications Disposed of During Month - Enter the total number of applications removed from the application count during the month, because they were granted, denied, withdrawn, or canceled. Adjustments to correct errors in the application count are not to be made in this item but in Item 1. Item 4 is the sum of Items 4A, 4B, and 4C.

Item 4A. Applications Granted - Enter here the number of applications for Security for the Blind that have been approved by action of the local Deputy Director, SDSW during the month.

Item 4B. Applications Denied - Enter here the number of applications for Security for the Blind denied by action of the local Deputy Director SDSW during the month.

Item 4C. Applications Withdrawn or Canceled - Enter the total number of Security for the Blind applications withdrawn by applicants during the month or canceled because the applicants have either died or their whereabouts are unknown. Adjustments to correct errors in the application count are not to be made in this item but in Item 1.

Item 5. Applications Pending At End of Month - Enter here the number of applications on file on the last day of the month which are awaiting decision in respect to eligibility for Security for the Blind.

Section B - Case Movement

Item 6. Cases Continued from Preceding Month - Enter the number of authorized cases whose Security for the Blind had not been terminated by the end of the preceding month. This entry should agree with Item 12 of the preceding month's report. If Item 12 of the preceding month was found to be in error, the correct figure should be shown here (Item 6). An explanation of the difference should be made on the reverse side of the report.

Item 7. Applications Granted During the Month - Enter the figure shown in Item 4A.

Item 8. Cases Restored During Month - Enter the number of cases restored to Security for the Blind by action of the Deputy Director SDSW on Notice of Change (Form B1-232) during the month. Report restorations in the month in which action was

Item 10. Total [illegible]ses Active During Month - Ente[illegible]e sum of Items 6, 7, 8, and 9. This item is also the sum of Items 10A and 10B.

Item 10A. Warrant Issued - Enter the number of persons who received APSB during the month for this month. Exclude cases who did not receive APSB because their warrants for the month were not written or were canceled, "held", or suspended.

Item 10B. Warrant Not Issued - Enter the number of APSB cases to whom warrants were not issued during the month. Include cases for whom warrants were not written or whose warrants were canceled, "held", or suspended.

Item 11. Discontinued During Month - Enter the number of cases whose APSB was terminated by action of the Board of Supervisors on Notice of Change (Form APSB-232) during the month regardless of the effective date on the Notice of Change. Include cases for whom responsibility for payment was transferred to other counties and to other types of public assistance.

Item 11A. Cases Discontinued - Transferred to Security for the Blind - Enter the number of cases whose APSB was terminated by action of the Board of Supervisors because the recipient was transferred to the Security for the Blind program.

Item 11B. Cases Discontinued for Other Reasons - Enter the number of cases whose APSB was terminated for some reason other than transfer to Security for the Blind.

Item 12. Cases Continued to Next Month - Enter the number of cases which on the last day of the month appeared eligible for the next month's grant, or which have not been formally discontinued by action of the Board of Supervisors. This count equals Item 10 minus Item 11.

Section C - Obligations Incurred for APSB

This section is designed to report the amount of APSB paid to recipients during the month for that month and the amounts to be paid from State and County funds. Exclude retroactive payments and current warrants which were canceled, "held", or suspended.

Item 13. Total Obligations - Enter the total amount of APSB paid for the month being reported.

Item 13A. State Share - Enter the amount of APSB reported in Item 13 to be paid from State funds.

Item 13B. County Share - Enter the amount of APSB assistance reported in Item 13 to be paid from County funds.

MONTHLY STATISTICAL REPORT ON
AID TO PARTICALLY SELF-SUPPORTING BLIND RESIDENTS

COUNTY _____ REPORT FOR THE MONTH OF _____ 19 ____

SECTION A- APPLICATIONS:

1. Pending from preceding month		_____
2. Received during month		_____
3. Total during month (Item 1 + 2)		_____
4. Disposed of during month		_____
A. Granted	_____	
B. Denied	_____	
C. Withdrawn or canceled	_____	
5. Pending at end of month		_____

SECTION B - CASES:

6. Continued from preceding month		_____
7. Applications granted during month		_____
8. Restored during month		_____
9. Transferred from another county during month		_____
10. Total active during month (Item 6 + 7 + 8 + 9)		_____
A. Warrant issued	_____	
B. Warrant not issued	_____	
11. Discontinued during month		_____
A. Transferred to Security for the Blind	_____	
B. Other	_____	
12. Continued to next month		_____

SECTION C - OBLIGATIONS INCURRED:

13. Total		$_____
A. State share	$_____	
B. County share	$_____	

(Signature of Reporting Officer) _____ (Title) _____

(Date) _____ 19 ____

Form APSB 237, (December 1948)

WIC 115, 116

CHARLES M. WOLLENBERG
Director

EARL WARREN
Governor

STATE OF CALIFORNIA
DEPARTMENT OF SOCIAL WELFARE
616 K STREET
SACRAMENTO 14

December 30, 1948

FILED
in the office of the Secretary of State
of the State of California
JAN 10 1949
At 1:45 o'clock P. M.
FRANK M. JORDAN, Secretary of State
By Robert V. Jordan
Assistant Secretary of State

DEPARTMENT BULLETIN NO. 341 (Fiscal)

TO: COUNTY BOARDS OF SUPERVISORS
COUNTY AUDITORS
COUNTY WELFARE DEPARTMENTS

Subject: Constitutional Amendment - Aged and Blind Security Programs

Your county has entered into contract with the State Department of Social Welfare to administer the Aged and Blind Security Programs effective January 1, 1949.

In making this agreement, the county materially assists in assuring the aged and blind of this State that assistance shall be administered promptly.

To eliminate or avoid delay, the following regulations shall be adhered to by county welfare departments. (Separate instructions are being issued to county auditors by the State Controller.)

1. Approval of Estimates and Claims

Section 6 of the agreement provides that the board of supervisors of the county shall estimate the monthly amount of administrative costs and expenses the county will incur each month.

This section 6 further provides that the county shall withdraw monthly from said funds so advanced such amounts as may be necessary to pay administrative costs and expenses incurred during such month.

Question has been raised as to whether or not board of supervisors' action is required on estimates and claims. The following regulations apply:

ESTIMATES:

The board of supervisors may adopt a resolution authorizing a county official other than a board member to sign the monthly estimates and any supplemental estimates required. A copy of the board resolution shall be filed with the State Department of Social Welfare immediately after adoption.

CLAIMS:

The board of supervisors may adopt a resolution authorizing a county official other than a board member to sign the monthly claims submitted to the State Department of Social Welfare as a credit against sums advanced for Aged and Blind Security payments and for administrative costs. A copy of the resolution shall be filed with the State Department of Social Welfare immediately after adoption.

Estimates of experditures for aid and administration for Aid to Needy Children and Aid to Partially Self-Supporting Blind will be filed quarterly in accordance with procedures in effect on and prior to December 1, 1948. See Manual of Policies and Procedures, Sections 601-00 through 601-99.

Quarterly adjustment of funds will continue to be made for Aid to Needy Children and Aid to Partially Self-Supporting Blind in accordance with procedures in effect on and prior to December 1, 1948.

2. Request for Additional Funds

Whenever a county finds it has insufficient funds for the payment of security and/or administration it may secure additional funds by completing a supplemental estimate and forwarding it to the State Department of Social Welfare.

Such supplemental estimate shall be submitted on the regular estimate forms, Ag 809-A, Old Age Security--Claim for Estimated Expenditures, and/or Bl 809-A, Security for the Blind--Claim for Estimated Expenditures, and shall be accompanied by a statement setting forth the reason(s) for the shortage.

3. Filing of Claims - Administration

A ruling has been received to the effect that effective December 1, 1948, all claims filed with the State Department of Social Welfare for reimbursement of administrative costs shall be on the basis of bills paid but segregated according to the month to which the benefit of the expenditure accrues.

For example: The January main claim will include, under Salaries and Wages, services rendered in January but paid for in January or in February up to the time the main claim is prepared. As administrative expense claims must be submitted to the State Department of Social Welfare by the 10th day following the month for which claim is made, supplemental January claims will be filed for all January services paid for after the main January claim has been filed. These supplemental January claims will be attached to, and become a part of, the February claim.

Claims shall be filed by each county in accordance with established procedures modified to the extent of increased participation and revised claim procedures as outlined below:

a. Increased Participation

Effective December 1, 1948, the State will reimburse 100% of the cost incurred by the county in accordance with terms of the agreement in administering the Aged and Blind Security Programs. The administration of Aid to the Partially Self-Supporting Blind is not a part of the agreement and is not reimbursable as such under this provision.

b. Revised Claim Procedure

County welfare departments shall, beginning with the claim for December 1948, file claims for administrative expense for the Aged and Blind Security, Aid to the Partially Self-Supporting Blind, Aid to Needy Children, Child Welfare Services, Boarding Home Aged, Boarding Home Children, Adoptions, and other programs as may be administered by them as follows:

(1) For Salaries d Wages on the basis of the mc in which the services were rendered; for maintenance and operation and capital outlay expenditures readily identifiable with a specific month will be reported on the basis of the month in which the expenditure is identifiable; for maintenance and operation and capital outlay not readily identifiable with a specific month on the basis of the month in which payment is made. Claim may not be made for any expenditure until it has either been paid or cleared by intra-county billing. In some counties supplies are secured from the Purchasing Agent or through a Stores System. The county shall, for claim purposes, use the month of billing by the Purchasing Agent or Stores Department as the month of expenditure, unless the accrual month is specified.

Example: In preparing the December 1948 claim, the following expenditures were to be considered:

(a) Salaries and wages for December paid January 3, 1949.
(b) Pencils, ink, typewriter ribbons, and miscellaneous forms ordered and received during November and December but paid during December 1948.
(c) November 1948 rent paid in December 1948.

In preparing the claim for the month of December 1948, all salaries and wages paid on January 3, 1949, will be included in the December 1948 claim as the services were actually rendered during the month of December 1948. Maintenance and operation expenditures paid during December 1948 and not readily identifiable with a specific month, such as pencils, ink, typewriter ribbons, etc., listed under (b) above, will be charged against the month of December 1948, the month in which payments were made. The expenditure for November 1948 rent paid in December 1948 will be charged against the month of November 1948, as this is an expenditure readily identifiable with a specific month.

(2) Services of other county agencies (excluding those billed the State Controller) may be included in the welfare claim when reimbursement has not been requested from any other state department and the county has met all conditions relating to (1) immediately above and general plan requirements. Other county agencies need not officially "bill" the welfare agency for claim purposes. The county will continue to show on the Welfare Department's administrative expense claim services of other county departments, including the county auditor's office for warrant writing and other services for Aid to Needy Children. The guide will be to continue claiming as in the past for all expenses except for those which are being reimbursed by another department of State government. Counties are cautioned that fiscal exceptions are being recorded to claims for warrant writing services and expenses of other agencies where supporting data is not on file in the county.

Counties claiming participation for expenses of county auditor shall refer to State Department of Social Welfare Manual of Policies and Procedures, Section 645-27. Attention is called to the fact that if claim is made on a unit cost basis, the county shall, at least once but not more than twice each fiscal year, conduct a study to establish a new unit cost or verify existing costs.

Counties will ___d it necessary in many instanc... to file each month:

Main Claims which will include all expenditures for salaries and wages for which services were performed for such month and for which payment has been made; and expenditures for maintenance and operation and capital outlay for which payment was made in accordance with instructions contained in preceding pages.

Supplemental Claims which will include all cash expenditures for salaries and wages for which services were performed in a month prior to that shown on the main claim; and cash expenditures for maintenance and operation and capital outlay, which cash expenditures were identifiable with or were made in a prior month but were not included in that month's claim in accordance with instructions contained in preceding pages.

State field audits will make necessary adjustments for initial claims filed under the revised procedures.

4. Time Recordings

It is necessary that counties add to their time records the new program classification "aged-Ineligible". Time and expense will be charged to this category whenever it is expended on behalf of recipients ineligible to federal participation.

The Administrative Expense Affidavits, 807, are revised to show expenses accruing to the month covered by the Main Claim, together with space for reporting supplemental claims for months subsequent to November 30, 1948, and months prior to December 1, 1948.

Other changes in regulations regarding time recording and also effective January 1, 1949, are:

1. Federal regulations provide that time recorded on Daily Time Sheets must be to the nearest 15 minute intervals rather than 30 as now provided.

5. Costs to be Included in Claim

In the agreement between the county and the state, the board of supervisors of each county is designated as the single agency responsible for supervising county performance.

The State Department of Social Welfare looks to the county board of supervisors to determine the personnel, quarters, services, supplies and equipment necessary for the administration of the Aged and Blind Security Programs.

Where it is found by the board of supervisors that equipment costing more than $500 per item is necessary, the State Department of Social Welfare should be notified at once by the board of supervisors or its delegated agent as to the items necessary and the reason for the expenditure.

As soon as official notification is given the county as to approval, the board of supervisors should then cause the amount approved to be included in the monthly claim in which the cash outlay will be made. In the agreement

entered into, it is stated that the State Department of Finance's approval is required. All requests should be forwarded to the State Department of Social Welfare and this department will be responsible for securing and notifying the county of the Department of Finance's action.

6. Payment of Administrative Costs

Counties will continue to pay expenses of administration (salaries, maintenance, supplies, etc.) in accordance with procedures in effect prior to December 1, 1948. The only change will be that the county will claim reimbursement under the increased ratio of participation.

Effective December 1, 1948, expenses for Aged and Blind Security of county auditors, county treasurers, etc., formerly included in the county welfare department's administrative expense claim will now be deleted and will be claimed directly from the State Controller. The county welfare department will include, in its monthly administrative expense claim, expenses incurred through their appropriation or expenses of other county agencies directly identifiable with welfare employees. Counties will continue to charge the State Department of Social Welfare for such expenses incurred on behalf of the Aid to Needy Children Program.

7. Inventory Records of Property Acquired from State Funds

County shall maintain accurate and complete records of all personal property purchased by the county in whole or in part from state funds on and after December 1, 1948. The records shall indicate the article purchased, warrant number, date and amount of purchase, serial number of the article or description and any other identifying information felt necessary such as location, etc.

"Personal Property" as referred to herein means non-expendable property which is of a permanent character or whose useful life is of long duration.

Where the amount of the expenditure or the amount allocated to Aged and Blind Security (excluding Aid to Partially Self-Supporting Blind) is $5.00 or more for each item, the item shall be reflected on appropriate inventory records.

Equipment comprises those movable articles which can be used repeatedly without appreciable impairment of physical condition. Examples: desks, chairs, typewriters, lamps, desk sets, rugs, automobiles, books, staplers, trays, etc.

Supplies are commodities for which no inventory record need by kept and represent commodities consumed by use, such as stationery, fuel, forms, pencils, etc.

Counties will itemize monthly on Form DFA 64-E, Inventory Record of Property Acquired from State Funds, all personal property expenditures during the month which cost $5.00 or more per item. The possession, control of and such title as the county may have in any property purchased for use of the county and recorded on this form shall, upon termination of the agreement between the county and the state, be surrendered to the state.

The county should determine that only non-expendable property is listed on Form DFA 64-E. Do not list supplies such as forms, pencils, stationery, etc.

These are expendabl tems which are not regarded as rsonal property within the meaning of this regulation.

8. Repairs and Alterations

Repairs and Alterations are defined as improvements or structural changes in a building resulting in a better piece of property in the sense of greater durability or increased efficiency. State Department of Social Welfare Form DFA-117, Request for Approval of Repairs and Alterations, must be submitted to the State Department of Social Welfare in advance and approval must be given the county before expenditures are made. See State Department of Social Welfare Manual of Policies and Procedures, Section 645-37 for full detail.

Counties will not be reimbursed in full at one time as in the past, but will receive federal and state participation in expenditures for approved repairs and alterations on an amortized basis.

In those counties claiming maintenance and service in lieu of rent the approved amount of monthly amortization will be added to the net amount claimed each month for maintenance and service in lieu of rent.

In those counties for which no claim for maintenance and service in lieu of rent is made, the approved amount of amortization will be shown on the worksheet, Form DFA 64-B, under Capital Outlay and designated as "Repairs and Alterations."

9. Forms

The following forms are now being revised:

DFA 64, Worksheet for Allocation of Expenditures Based on Results of Time Recording for Salaries and Wages Only

DFA 64-A, Worksheet for Allocation of Expenditures Based on Results of Time Recording for Maintenance and Operation and Capital Outlay.

Counties will use present supplies, changes as necessary, and will receive revised forms in the near future.

Very sincerly yours,

Chas. M. Wollenberg

CHARLES M. WOLLENBERG, Director
Department of Social Welfare

STATE OF CALIFORNIA

INVENTORY RECORD OF PROPERTY
ACQUIRED FROM STATE FUNDS

SUBMIT 4 COPIES TO
STATE DEPARTMENT OF SOCIAL WELFARE

COUNTY OF _____

(To Accompany Administrative Expense Worksheets, Forms DFA 64 & 64A)

WARRANT NUMBER (1)	DATE OF WARRANT (2)	ARTICLE PURCHASED (3)	COST OF ARTICLE (4)	SERIAL NUMBER (5)	COUNTY INVENTORY NO. (6)	REMARKS (Show "Location" if Possible) (7)

Form DFA 64E, December 1948

TITLE 22 CH 2

Certified as a Re ation (or
Regulations) of the

Dept of Soc. Welfare
(Name of State Agency)

Myrtle Williams
(Signature)

Director
(Title)

1-19-49
(Date)

Art XXV Calif Constit

Wx K 103.5, 114

Myrtle Williams
Director

EARL WARREN
Governor

STATE OF CALIFORNIA
DEPARTMENT OF SOCIAL WELFARE
616 K STREET
SACRAMENTO 14

January 14, 1949

FILED
in the office of the Secretary of State
of the State of California

JAN 21 1949
At 4 o'clock P. M.
FRANK M. JORDAN, Secretary of State
By Robert E. Jordan
Assistant Secretary of State

DEPARTMENT BULLETIN NO. 348 (OAS, SB)

TO: COUNTY BOARDS OF SUPERVISORS
COUNTY WELFARE DEPARTMENTS
COUNTY AUDITORS

Subject: Contributions from Relatives

Under the expressed provisions of Article XXV of the State Constitution, no relatives of applicants or recipients of Old Age Security or Security for the Blind are required to make any contributions; nor shall any such relatives be requested, directly or indirectly, to make or to continue making a contribution.

The names and addresses of relatives of applicants and recipients will be ascertained if this information is freely supplied, but the name and address of the spouse must be secured.

When an applicant or recipient reports the recipt of a contribution from a relative, the exact amount of the monthly contribution and the probable period of its duration shall be determined by means of a letter to the relative. This letter must: (a) explain to the relative the fact that he no longer is required to make any contribution; (b) ask the amount of his present monthly contribution and its probable duration; and (c) state that the recipient will be able to use such amount of any contributions you make to provide for his need in excess of $75 ($85 in Security for the Blind), and that the security payment will be reduced only if all of your contribution is not needed for that purpose.

When an applicant or recipient reports an increase or decrease in a contribution from a relative, or the cessation of the contribution, any necessary adjustment shall be made in the recipient's grant on the basis of his statement. The exact amount and time of the changes shall then be determined by means of a letter to the relative as indicated above.

Contributions currently received by applicants and recipients constitute income to be considered in determining the grant.

Very sincerely yours,

Myrtle Williams

MYRTLE WILLIAMS, Director
Department of Social Welfare

TITLE 22 - CH 2

Certified as a Re[illegible]tion (or Regulations) of the

Dept of Soc. Welfare
(Name of State Agency)

Myrtle Williams
(Signature)

Director
(Title)

1-19-49
(Date)

Art. XIV. Cal. Constit.
Wel. & I.C. 103.5, 114

Myrtle Williams
Director

EARL WARREN
Governor

STATE OF CALIFORNIA
DEPARTMENT OF SOCIAL WELFARE
616 K STREET
SACRAMENTO 14

January 14, 1949

FILED
in the office of the Secretary of State
of the State of California

JAN 21 1949
At 4 — o'clock P. M.
FRANK M. JORDAN, Secretary of State
By Robert T. Jordan
Assistant Secretary of State

DEPARTMENT BULLETIN NO. 347 (OAS)

TO: COUNTY BOARDS OF SUPERVISORS
COUNTY WELFARE DEPARTMENTS
COUNTY AUDITORS

Subject: Old Age Security Budget

The following Old Age Security Budget Schedule is effective as of January 1, 1949.

Food	40.65
If all meals are purchased in restaurants	71.15
Housing, as paid	———
Transportation	6.00
Clothing	8.80
Household operations	4.50
*Heavy house cleaning	2.00
Utilities, as paid, or the following minima	
Electricity	1.20
Gas	1.85
Water	1.40
Garbage removal	.50
Other, for example, heat	3.15
Incidentals and personal needs	10.00
Other needs, such as medical care in the amount of actual cost	———

*Heavy house cleaning--This is a new mandatory item and is intended to cover the cost of employing outside help once a month to do heavy cleaning such as floors, woodwork, windows, etc. This item shall be allowed routinely in the budget for all persons who maintain their own household or who live in a rented room, in a hotel or elsewhere, since rental charges in these places ordinarily do not include adequate cleaning.

The total need of every recipient whose security payment is less than $75 shall be computed on the basis of the new budget schedule. When he would benefit by having his security paid on the basis of his need thus determined, an appropriate grant increase shall be made. Such additional security as is payable under the new budget schedule from January 1, 1949, shall be paid as soon as possible but not later than April 30, 1949.

When new applicants, or those requesting restoration, have income from any source their security grants shall be paid on the basis of their need as determined by the new budget schedule when payment on that basis would benefit them.

The new budget schedule shall be substituted for the budget schedule appearing in the Manual of Policies and Procedures, Section 155-25 pending appropriate revision of that section.

Grant increases may be reported by use of the Notice of Change, Form Ag 232, in the usual manner, or they may be reported by list.

If lists are used to report the increases they must be submitted in duplicate and the cases must be listed in numerical order according to state number. The following statement must appear at the beginning of each list.

> The following recipients of OAS are entitled to an increase effective January 1, 1949, to adjust their grants on the basis of the new Old Age Security Budget.

State Number	Name	Amt. of Grant From Date of Change	Total Income Other Than OAS	Source and Amt. of Income	Total Need

On the last page of the list the certification of the deputy director SDSW shall be affixed as follows:

> I certify that the persons listed on pages_____through_____are eligible to Old Age Security in the amount set forth opposite each name, that supporting evidence is in the case record where it is open to inspection by duly authorized state and federal representatives, and I authorize payments to be made to said persons in the amounts specified.
>
> _____ _____
> Deputy Director SDSW Date

The deputy director's signature may be the original or a facsimile.

Should recipients be eligible to receive payment in an increased amount from the first of a month subsequent to January 1, 1949, separate lists shall be prepared according to the month in which the increase is first effective. The beginning date shall be stated in the statement appearing at the top of each such list.

Very sincerely yours,

Myrtle Williams

MYRTLE WILLIAMS, Director
Department of Social Welfare

TITLE 22-CH2

Certified as a Reg tion (or
Regulations) of the

Dept of Social Welfare
(Name of State Agency)

Myrtle Williams
(Signature)

Director
(Title)

1-19-49
(Date)

1/9/C 114,346 0

MYRTLE WILLIAMS
Director

STATE OF CALIFORNIA
DEPARTMENT OF SOCIAL WELFARE
616 K STREET
SACRAMENTO 14

January 18, 1949

FILED
In the office of the Secretary of State
of the State of California

JAN 21 1949
At 4 o'clock P. M.
FRANK M. JORDAN, Secretary of State
By Frank M. Jordan
Assistant Secretary of State

DEPARTMENT BULLETIN NO. 346 (APSB)

TO: COUNTY BOARDS OF SUPERVISORS
COUNTY WELFARE DIRECTORS
COUNTY AUDITORS

Subject: Aid to Partially Self-Supporting Blind Residents--Forms APSB 200 and APSB 201

Attached is a copy of the Application for Aid to Partially Self-Supporting Blind Residents (Form APSB 200) and the Certificate of Verification of Eligibility (Form APSB 201) for use in connection with the Application for Aid to Partially Self-Supporting Blind Residents.

The application form (APSB 200) and Certificate of Eligibility form (APSB 201) shall be used for applications filed on or after February 1, 1949. It is to be noted that action by the County Board of Supervisors is, as heretofore, required prior to the granting of Aid to Partially Self-Supporting Blind Residents.

Instructions in Manual Sections 202-20 and 237-50 for the completion of the Application form and the Certificate of Verification of Eligibility apply to the completion of Forms APSB 200 and APSB 201.

With the exception of Sections 351-57, 362-00, 362-05, 362-20, 362-30, 362-46, and 362-50 (See Department Bulletins 344 and 345), the Manual of Policies and Procedures remains effective insofar as Aid to Partially Self-Supporting Blind Residents is concerned.

An additional supply of these forms is being sent under separate cover.

Very sincerely yours,

Myrtle Williams

MYRTLE WILLIAMS, Director
Department of Social Welfare

Attachments

State of California

Department of Social Welfare

State Number _____

County Number _____

_____
Former State Number, If a Transfer or Reapplication

APPLICATION FOR AID TO PARTIALLY SELF-SUPPORTING BLIND RESIDENTS

STATE OF CALIFORNIA--County of _____

To the Honorable Board of Supervisors:

I, _____, residing at _____
Print or Type Name in Full — Street No. or RFD (If in institution give name)

City _____, County of _____, California, herewith apply for Aid to Partially Self-Supporting Blind Residents and to the best of my knowledge and belief I am eligible, to wit:

1. BLINDNESS: I am blind to the extent--Totally _____ Partially _____

Degree if known _____ I have been blind since _____

2. AGE: I have attained the age of sixteen years. Birthdate _____ Sex _____

3. RESIDENCE: A. I have resided in California since _____ 19 _____

B. I have resided in the County of _____ since _____ 19 _____

C. I have resided in the following counties during the past ten years:

NAME OF COUNTY	FROM DATE	TO DATE

4. REAL PROPERTY: A. I live in a home which I own in whole or in part _____ Yes _____ No

(1) $ _____ County assessed value $ _____ Encumbrance of record

B. I own other real property _____ Yes _____ No

(1) $ _____ County assessed value $ _____ Encumbrance of record

5. ASSESSED PERSONAL PROPERTY: I own assessed personal property $ _____ County assessed value $ _____ Encumbrance of record

6. CASH AND SECURITIES: I have--A. Cash . . . . . $ _____ Total Amount

B. Insurance . . . . . $ _____ Total Face Value

C. Other securities . . . . . $ _____ Total Amount

7. RELATIVES: I have the following responsible relatives (spouse, adult children, parents) and receive support from them in the amount of $ _____

	NAME	ADDRESS
SPOUSE		
ADULT CHILDREN		
FATHER		
MOTHER		

8. INCOME: I have a monthly income of

AMOUNT	SOURCE
$	

9. REHABILITATION:

A. I am willing to use income and resources which I am permitted to retain for the purposes of achieving self-support.

Yes _____ No _____

B. I have had rehabilitation training. Yes _____ No _____

C. I am receiving rehabilitation training. Yes _____ No _____

D. Type of training _____

E. I am engaged in an enterprise from which I expect to become independent of public assistance and entirely self-supporting. Yes _____ No _____

F. Type of enterprise _____

G. I now have employment. Yes _____ No _____

H. Name of employer _____

I. My employment in the past has been _____

10. EDUCATION: I have attended--Grade School _____ (Number of years) High School _____ (Number of years) College _____ (Number of years)

11. PHYSICAL CONDITION: I am in _____ (Good--Fair--Poor) health.

12. ALMS: I do not solicit alms.

13. NEED: I am in need.

STATE OF CALIFORNIA--County of _____ :ss

I solemnly swear (or affirm) that the statements made herein which have been read to me are true and correct to the best of my knowledge, information and belief, and if aid is granted, I will notify the county authorities promptly of any real or personal property transactions of myself or spouse, of any change in marital status, financial conditions, address, or plan for self-support. Also, I agree to assist to the best of my ability in disclosing all information necessary in the preparation of my application for a recommendation to the Board of Supervisors.

NOTE--When the applicant can not sign his name, the signature of two witnesses to his mark must appear

_____
Signature or Mark of Applicant

_____
Witness to Mark

_____
Witness to Mark

Subscribed and sworn to before me this _____ day of _____ 19 _____

NAME _____ TITLE _____
Signature of person qualified to acknowledge an affidavit

Any applicant who is not satisfied with any decision in connection with his application, or delay in action on his application, may request a hearing before the Board of Supervisors; or may appeal directly to the State Department of Social Welfare, 616 K Street, Sacramento.

County submit ONE COPY to State Department of Social Welfare, Sacramento, accompanied by Forms APSB 201, BL 227, and BL 230 (and Form BL 204 when required).

State of California

Department of Social Welfare

CERTIFICATE OF VERIFICATION OF ELIGIBILI..
FOR AID TO PARTIALLY SELF-SUPPORTING BLIND RESIDENTS

IF NONCOUNTY CASE
Check here ☐

Send original or certified copy to State Department of Social Welfare, Sacramento, accompanied by Forms APSB 200, B1 227, B1 230

Applicant's Name (Give full name as on Form APSB 200) _____ County Number _____ Former State No. if a Transfer or Reapplication _____ State Number _____

ELIGIBILITY REQUIREMENTS	HOW VERIFIED (State nature of evidence and place where it may be reviewed)
1. BLINDNESS	
A. Evidence of degree of blindness obtained.... _____ Yes or No	1.
B. Became blind while a resident of California _____ Yes or No	
2. AGE	2.
A. Has attained the age of 16 years..... _____ Yes or No	
B. Birth date _____	
3. RESIDENCE	3.
A. Has State Residence..... _____ Number Years Verified	
B. Has County Residence..... _____ Number Years Verified	
C. Has no County Residence in present county..... _____ Date Residence Established	
4. PUBLIC INSTITUTION	4.
A. Is an inmate of a public institution..... _____ Yes or No	
B. Inmate of a public institution but will not be after..... _____ Month Day Year	
5. PROPERTY ASSIGNMENT	5.
Has made voluntary assignment of property to qualify for aid..... _____ Yes or No	
6. NEED	
A. Has real property county assessed value... $ _____	6A.
Encumbrance of record..... $ _____	
B. Has personal property (furniture, cars, jewelry, livestock, etc.) County assessed value..... $ _____	B.
Encumbrance of record..... $ _____	
C. Has other personal property of a total value of..... $ _____	C.
1. Cash..... $ _____	
2. Mortgages..... $ _____	
3. Trust Deeds..... $ _____	
4. Stocks and Bonds..... $ _____	
5. Insurance (cash surrender value)..... $ _____	
6. Other..... $ _____	
Encumbrance of record..... $ _____	
D. HAS NET INCOME AS FOLLOWS: Source / Amount	D.
_____ $ _____	
_____ _____	
_____ _____	
_____ _____	
_____ _____	
_____ _____	
7. RESPONSIBLE RELATIVES	7.
Is receiving contribution from legally responsible relatives..... _____ Yes or No	

Form APSB 201, January 1949

(OVER)

ELIGIBILITY REQUIREMENTS	HOW VERIFIED (State nature of evidence and place where it may be reviewed)
8. REHABILITATION	8. _____
A. Has a plan for self-support..... _____ Yes or No	_____
B. Type of training _____	_____
C. Is engaged in an enterprise from which self-support is expected to be achieved..... _____ Yes or No	_____
D. Type of enterprise _____	_____

9. CERTIFICATION AND RECOMMENDATION

I CERTIFY That the above facts have been verified by investigation, that complete supporting evidence is on file in the county office, is open to inspection by duly authorized State and Federal representatives, and that to the best of my knowledge and belief the above-named applicant:

A. Meets the necessary requirements and qualifies for Aid to Partially Self-Supporting Blind Residents under the existing law, and my recommendation is that aid be granted in the amount of $_____.

If beginning date of aid is later than specified under Sections 3082 or 3460 of the W. and I. Code, specify date from which eligibility verified _____. Reason for ineligibility prior to this date _____

B. Fails to meet the necessary requirements to qualify for Aid to Partially Self-Supporting Blind Residents under the existing law, and my recommendation is that aid be denied for the following reason: _____

10. _____ Signature of County Worker _____ Date

11. _____ Signature of County Case Supervisor or County Director _____ Date

12. Approved by the Board of Supervisors of _____ County, this _____ day of _____ 19____ for Aid to Partially Self-Supporting Blind Residents in the amount of $_____, aid to begin on the _____ day of _____ 19____

13. Denied by the Board of Supervisors of _____ County, this _____ day of _____ 19____

14. _____ Signature of County Clerk or Deputy

DATE	TOTAL AID	REASON FOR CHANGE

RESERVE THIS SPACE FOR STATE

State Number _____ BI

County _____ Co. No. _____

Applicant _____ (Full Name)

New _____ Reapplication _____ Transfer _____

Cross Reference _____

Aid to begin _____

Amount $ _____

Yrs. of Verified Residence _____

Noncounty through _____

Guardian of Estate _____ DPA 5 on file _____

Approved for Reimbursement _____ Reviewer

Date _____

Signature of Audit Clerk

Date _____

SUBSEQUENT CHANGES

DATE	TOTAL AID	REASON FOR CHANGE

TITLE 22-CH2

Certified as a Regulation (or
Regulations of the

Dept of Loc. Welfare
(Name of State Agency)

Myrle Williams
(Signature)

Director
(Title)

2-4-49
(Date)

Article XXV Calif Const.
& IC 114.346

Myrtle Williams
Director

Earl Warren
Governor

STATE OF CALIFORNIA
DEPARTMENT OF SOCIAL WELFARE
616 K STREET
SACRAMENTO 14

January 13, 1949

FILED
in the office of the Secretary of State
of the State of California

JAN 21 1949

At 4 o'clock P. M.
FRANK M. JORDAN, Secretary of State
By [signature]
Assistant Secretary of State

DEPARTMENT BULLETIN NO. 345 (APSB, SB)

TO: COUNTY BOARDS OF SUPERVISORS
COUNTY WELFARE DIRECTORS
COUNTY AUDITORS

Subject: Change from One Category to Another--Security for the Blind and Aid to Partially Self-Supporting Blind Residents

An applicant for or recipient of Security for the Blind may apply for Aid to Partially Self-Supporting Blind Residents or vice versa. If the applicant is eligible under either program the appropriate application shall be completed under the category which the applicant feels would be more advantageous to him. Also, when either Security for the Blind or Aid to Partially Self-Supporting Blind Residents has been granted the law requires that redetermination shall be made annually as to whether the grant shall continue under the same program or whether there should be a change to the other of the two programs for the blind. If a change in category is determined upon, the appropriate application form shall be completed.

It is no longer possible to effect a transfer between these two programs for the blind by means of a Notice of Change. The signature of the applicant is required on the Application for Security for the Blind (Form BL 200) or on the Application for Aid to Partially Self-Supporting Blind Residents (Form APSB 200). The provisions of Manual Section 351-57 are therefore obsolete.

When a change from one category to the other is effected there shall be no interruption in the receipt of a grant by the recipient; neither shall there be over-lapping in the date of discontinuance of payment under one program and the date of beginning of aid under the other.

If there has been investigation and verification of eligibility during the past year, the evidence secured through such investigation is acceptable in effecting a change from one category to another, except that verification of eligibility under the Aid to Partially Self-Supporting Blind Residents law must include: (a) verification of residence in California for a period of ten (10) years immediately preceding the filing of application <u>or</u> verification of the fact that applicant became blind while a resident of California; <u>and</u> (b) verification of the applicant's plan for achieving self-support.

When an application for Security for the Blind is granted, the recipient may transfer to Aid to Partially Self-Supporting Blind Residents at any time. On the other hand, when an application for Aid to Partially Self-Supporting Blind Residents is granted, a recipient is not eligible for Security for the Blind for a period of

one year from the date of application for Aid to Partially Self-Supporting Blind Residents. When one year or more has elapsed from the date of filing an application for Aid to Partially Self-Supporting Blind Residents, a recipient may be transferred to Security for the Blind at any time, if eligibility therefor is established.

When a grant is made under the Aid to Partially Self-Supporting Blind Residents program, the original or a certified copy of the Application (Form APSB 200) together with the Certificate of Eligibility (Form APSB 201) shall be sent to the State Department of Social Welfare, 616 K Street, Sacramento, immediately after action by the County Board of Supervisors.

When a grant is made under the Security for the Blind program, the original or a certified copy of the Application (Form BL 200) together with the Certificate of Eligibility (Form BL 201) shall be submitted to the State Department of Social Welfare, 616 K Street, Sacramento, immediately after authorization of a grant by the local Deputy Director SDSW.

Very sincerely yours,

Myrtle Williams

MYRTLE WILLIAMS, Director
Department of Social Welfare

TITLE 22 - CH 2

Certified as a Regu[illegible]ion (or Regulations) of the

Dept. of Social Welfare
(Name of State Agency)

Myrtle Williams
(Signature)

Director
(Title)

1-19-49
(Date)

- 41C114.3460

Myrtle Williams
Director

Earl Warren
Governor

STATE OF CALIFORNIA
DEPARTMENT OF SOCIAL WELFARE
616 K STREET
SACRAMENTO 14
January 13, 1949

FILED
in the office of the Secretary of State
of the State of California

JAN 21 1949
At 4 o'clock P. M.
FRANK M. JORDAN, Secretary of State
By Robert T. Jordan
Assistant Secretary of State

DEPARTMENT BULLETIN NO. 344 (APSB)

TO: COUNTY BOARDS OF SUPERVISORS
COUNTY WELFARE DEPARTMENTS
COUNTY AUDITORS

Subject: Notice of Change, Form APSB 232, January 1949

Information on changes in APSB grants made by board of supervisors action on or after February 1, 1949, shall be reported to the State Department of Social Welfare on the Notice of Change, Form APSB 232, copy of which is attached.

Manual Sections 362-00, 362-05, 362-20, 362-30, 362-46, and 362-50 will not apply to APSB for reporting changes having board of supervisors action on or after February 1, 1949.

Following are the instructions for completing the Notice of Change, Form APSB 232.

GENERAL

The Notice of Change (Form APSB 232), except as it provides for identifying information, is divided into sections, which are designated as Sections I, II, and III.

Section I is used to report information regarding:

1. Type of change. This includes decrease, increase, restoration, or discontinuance of the grant.

   One Form APSB 232 may be used to report two types of change by action of the board of supervisors on the same case provided both actions occur on the same day.

2. Reason for change. See instructions for reporting reason for change below. The reason for discontinuance of aid is not recorded here but shall be shown in Section II.

Section II is used to report information on discontinuances.

Section III is used to report action of the board of supervisors.

SECTION I

Column 1, Change. The type of action is indicated by completing the information called for in the vertical columnar headings (2, 3, 4, and 5) in the space provided opposite "Decrease", "Increase", or "Restoration". Columns 3, 4, and 5, are not applicable to discontinuances.

If aid is restored following release from the county hospital, restoration action of the board of supervisors is reported opposite "Restoration".

Column 2, Effective Date of Change. Enter the date from which the change is effective. If retroactive aid is paid, the month for which the retroactive payment was made should be entered in Column 2.

Column 3, Grant from Date of Change. Enter the monthly rate of aid granted from the effective date shown in Column 2. (If aid is restored effective from a day subsequent to the first day of the month, the monthly rate rather than the prorated amount shall be entered.)

If retroactive aid is paid, enter the monthly rate of aid granted from the effective date shown in Column 2.

Column 4, Total Income Other than APSB. Enter the total of all income received other than the APSB grant.

Column 5, Sources and Amounts of Income. Enter sources from which income other than APSB is received and amount received from each. The total of amounts of income from individual sources, as shown in Column 5, should agree with the figure entered in Column 4.

Reason for Change. If the reason for change (except discontinuance of aid) is clearly indicated by the entries in the vertical columns opposite the particular type of change which is effective, it need not be repeated under this heading. Report any additional information in this space. If a recipient's aid is discontinued, the reason shall be reported in Section II.

Change of a recipient's name due to marriage, court order, or for other reasons shall be reported to the SDSW under "Reason for Change".

Certain changes in guardianship status shall be reported under "Reason for Change" in accordance with Manual Section 230-60, Guardianship.

The month or months for which suspended payment was canceled as provided in Manual Section 361-33, Cancellation of Warrants for Months During which Recipient was Ineligible Under Suspension of Grant Procedure, shall be reported under "Reason for Change".

In reporting restoration following release from a public institution, the exact date of release shall be reported here. In reporting restorations for other reasons, information shall be entered here as to the exact date and the reason the recipient became eligible subsequent to discontinuance of aid.

When reporting restoration of aid following discontinuance for any reason, report the date the recipient's request for restoration was signed.

SECTION II. DISCONTINUANCE OF AID

See Manual Section 362-45 for instructions for completing Section II. Item 15, "Admitted to county infirmary (custodial care)", has been omitted from Form APSB 232 since it is not applicable in this program.

SECTION III. APPROVAL BY THE BOARD OF SUPERVISORS

Enter name of county and date of approval by the county board of supervisors. The Notice of Change (Form APSB 232) shall bear either the original or facsimile signature of the county clerk or deputy. A facsimile signature shall be affixed either by or under the special authority of the county officer whose signature is thus affixed.

* * * * * * * *

An additional supply of the Notice of Change (Form APSB 232) is being sent under separate cover.

Very sincerely yours,

Myrtle Williams

MYRTLE WILLIAMS, Director
Department of Social Welfare

Attachment

State of California

Department of Social Welfare

NOTICE OF CHANGE

Aid to Partially Self-Supporting Blind Residents

Submit two copies to State Department of Social Welfare for discontinuances and restorations; one copy for other changes. SUBMIT ONE COPY OF ALL CHANGES TO COUNTY AUDITOR.

County _____ County No. _____ State No. _____

NAME _____

DATE _____

SEC. I. AID TO THE INDIVIDUAL RECIPIENT

Change (1)	Effective Date of Change (2)	Grant From Date of Change (3)	INCOME OTHER THAN APSB: Total Income Other Than APSB (4)	INCOME OTHER THAN APSB: Sources and Amounts of Income (5)
Decrease				
Increase				
Restoration				
Discontinuance		Sec. II must be completed for Discontinuances		

REASON FOR CHANGE--Except Discontinuance: (Give date of release from institution if restored for this reason.)

SEC. II. DISCONTINUANCE OF AID TO THE INDIVIDUAL RECIPIENT

A. Date ineligibility discovered _____

B. Date of last previous county investigation _____

C. Reason for discontinuance of aid to recipient (Check applicable reason appearing first on list)

☐ 1. Death. Date _____

Income to recipient from:

☐ 2. Earnings of recipient

☐ 3. Earnings of spouse

☐ 4. Other resources of spouse

☐ 5. Contribution from parents or adult children

☐ 6. Contributions from others

☐ 7. Income from property (Specify) _____

☐ 8. Income from other sources (Specify) _____

Non-income reasons:

☐ 9. Subsequent information disproves eligibility

☐ 10. Change in law or policy (Specify) _____

☐ 11. Present vision exceeds standard for blindness

☐ 12. Refusal after acceptance to comply with established regulations (Specify) _____

☐ 13. Excess property

☐ 14. In county hospital (medical care) more than two months

Date of admission _____

Determination of probable hospitalization period:

☐ 2 months or less from date of admission

☐ More than 2 months from date of admission

☐ 16. Admitted to other public institution.

Date _____

17. Accepted for ☐ Name of Institution Security for Blind ☐ OAS

☐ 18. Loss of State residence

☐ 19. Transferred to _____ County

☐ 20. Other reason (Explain fully under "Remarks")

REMARKS:

If discontinuance is due to excess income or property (Items C.2-C.8 and C.13), state total amount of income, type and value of property, and date excess first received or acquired. Should a refund be due, state possibility of or plan for its collection.

☐ Check here if this information on excess income or property is not now available but will be submitted later.

SEC. III.

Approved by the Board of Supervisors of the County of _____ this _____ day of _____ 19__

RESERVE FOR STATE

Review _____ Date _____ SIGNED _____

County Clerk or Deputy

Audit _____ Date _____

Form APSB 232, January 1949

TITLE 22 CH 2

Certified as a Regulation (or Regulations) of the

Dept of Soc. Welfare
(Name of State Agency)

Myrtle Williams
(Signature)

Director
(Title)

1-19-49
(Date)

TWIC 103.5, 114, 115, 116

Myrtle Williams
Director

EARL WARREN
Governor

STATE OF CALIFORNIA
DEPARTMENT OF SOCIAL WELFARE
616 K STREET
SACRAMENTO 14

January 7, 1949

DEPARTMENT BULLETIN NO. 343 (Fiscal)

To: COUNTY BOARDS OF SUPERVISORS
COUNTY WELFARE DEPARTMENTS
COUNTY AUDITORS

Subject: Administrative Expense Affidavits:
Aged, Blind and Children Programs

Revised Ag, Bl, and Ca 807 affidavit forms (a 3 months' supply) are being forwarded concurrently with this bulletin to county welfare departments.

These forms are to be used for administrative expense claims filed for December 1948 and subsequent months in accordance with procedure outlined in Department Bulletin 341 (Fiscal).

Very sincerely yours,

Myrtle Williams

MYRTLE WILLIAMS, Director
Department of Social Welfare

Attachments

FILED
in the office of the Secretary of State
of the State of California

JAN 21 1949

At 4 o'clock P. M.

FRANK M. JORDAN, Secretary of State

By Frank M. Jordan
Assistant Secretary of State

State of California

Forward TWO copies to
State Department of Social Welfare
Sacramento, California

ADMINISTRATIVE EXPENSE AFFIDAVIT

OLD AGE SECURITY

FROM _____ COUNTY

MONTH OF _____, 19___, _____ FISCAL YEAR
(For State Use Only)

(Do Not Write in These Spaces)

1. Total Administrative Expense incurred for Aged persons under the Old Age Security program accruing to the month covered by this report . . . . . $_____

2. Administrative Expense incurred for Aged persons under the Old Age Security program accruing to prior months subsequent to November 30, 1948:

Month _____ 194 $_____
Month _____ 194 $_____
Month _____ 194 $_____
Month _____ 194 $_____
Month _____ 194 $_____
Month _____ 194 $_____

3. Total accruals for months subsequent to November 30, 1948 . . . . . $_____

4. Administrative Expense incurred for Aged persons under the Old Age Security program accruing to months prior to December 1, 1948:

Month _____ 194 $_____
Month _____ 194 $_____
Month _____ 194 $_____
Month _____ 194 $_____
Month _____ 194 $_____
Month _____ 194 $_____

5. Total accruals for months prior to December 1, 1948 . . . $_____

6. Fifty percent of Item 5 . . . . . $_____

7. Total amount due the county from the State for Administrative Expense incurred for the Old Age Security program. (Sum of Items 1, 3, and 6) $_____

FOR STATE USE ONLY

8. Adjustments for Administrative Expense for Aged Persons. . $_____

9. Adjusted amount of Administrative Expense for Old Age Security (Item 7 plus or minus Item 8.) $_____

STATE OF CALIFORNIA

COUNTY OF _____ ss

I, _____, BEING DULY SWORN, DEPOSE AND SAY: That I am the county official responsible for the administration of Old Age Security in and for the said county; that all of the provisions of Chapter I of Division III of the Welfare & Institutions Code, and amendments thereto, of Article XXV of the Constitution of the State of California, and of Title I of the Social Security Act, and amendments thereto, have been complied with to the best of my knowledge and belief and that the above expenditures were incurred in administering, or were allocated to such program; that with regard to expenditures for salaries and wages included herein all employments and rates are correctly shown and are based upon authorization in compliance with the requirements of the rules for a merit system of personnel administration of the State Public Assistance Program as authorized in Division I, Chapter I, Section 119.5 of the Welfare & Institutions Code, and amendments thereto.

SUBSCRIBED AND SWORN TO BEFORE ME THIS _____ DAY

of _____, 19 _____

_____
TITLE _____

_____
SIGNATURE OF WELFARE DIRECTOR OR OFFICIAL IN CHARGE

TITLE _____

I HEREBY CERTIFY, that warrants have been issued, or expenditures otherwise incurred in settlement of the Administrative Expenses reflected in this affidavit.

_____
SIGNATURE OF COUNTY AUDITOR

Form AG 807, Revised January 1949
AGED ADMINISTRATIVE EXPENSE AFFIDAVIT
TO ACCOMPANY MONTHLY ADMINISTRATIVE
EXPENSE WORKSHEETS

State of California

Forward TWO copies to
State Department of Social Welfare
Sacramento, California

ADMINISTRATIVE EXPENSE AFFIDAVIT

SECURITY FOR THE BLIND

FROM _____ COUNTY

MONTH OF _____, 19___, _____ FISCAL YEAR
(For State Use Only)

(Do Not Write in These Spaces)

1. Total Administrative Expense incurred for Blind persons under the Security for the Blind Program accruing to the month covered by this report . . . . . $ _____

2. Administrative Expense incurred for all Blind persons under the SBP accrued to prior months subsequent to November 30, 1948:

Month _____ 194 $ _____
Month _____ 194 $ _____
Month _____ 194 $ _____
Month _____ 194 $ _____
Month _____ 194 $ _____
Month _____ 194 $ _____

3. Total accruals for months subsequent to November 30, 1948. . . . . $ _____

4. Administrative Expense incurred for all Blind persons under the ANB-Eligible Program accrued to months prior to December 1, 1948:

Month _____ 194 $ _____
Month _____ 194 $ _____
Month _____ 194 $ _____
Month _____ 194 $ _____
Month _____ 194 $ _____
Month _____ 194 $ _____

5. Total accruals for months prior to December 1, 1948. . . . . $ _____

6. Fifty percent of Item 5 . . . . . $ _____

7. Total amount due the county from the State for Administrative Expense incurred for the ANB and SB programs. (Sum of Items 1, 3 and 6.). . . . . $ _____

FOR STATE USE ONLY

8. Adjustments for Administrative Expense for Blind Persons . . $ _____

9. Adjusted amount of Administrative Expense for Security for the Blind. (Item 7, Plus or Minus Item 8.) . . . . . $ _____

STATE OF CALIFORNIA

COUNTY OF _____ ss

I, _____, BEING DULY SWORN, DEPOSE AND SAY: That I am the County Official Responsible for the Administration of Security for the Blind in and for the said County; That all of the Provisions of Chapter I of Part I of Division V of the Welfare and Institutions Code, and Amendments Thereto, Article XXV of the Constitution of the State of California, and Title X of the Social Security Act, and Amendments Thereto, Have Been Complied With to the Best of my Knowledge and Belief; That the Above Expenditures were Incurred in Administering, or were Allocated to, Such Program; That With Regard to Expenditures for Salaries and Wages Included Herein all Employees and Rates are Correctly Shown and are Based Upon Authorization in Compliance With the Requirements of the Rules for a Merit System of Personnel Administration of the State Public Assistance Program as Authorized in Division I, Chapter I, Section 119.6 of the Welfare and Institutions Code, and Amendments Thereto.

SUBSCRIBED AND SWORN TO BEFORE ME THIS _____ DAY

OF _____, 19 _____

_____
SIGNATURE OF WELFARE DIRECTOR OR OFFICIAL IN CHARGE

_____

TITLE _____

TITLE _____

I HEREBY CERTIFY, That Warrants Have Been Issued, or Expenditures Otherwise incurred in Settlement of the Administrative Expenses reflected in this Affidavit.

_____
SIGNATURE OF COUNTY AUDITOR

Form BL 807, Revised January 1949
BLIND ADMINISTRATIVE EXPENSE AFFIDAVIT
TO ACCOMPANY MONTHLY ADMINISTRATIVE EXPENSE WORKSHEETS

State of California

Forward TWO copies to
State Department of Social Welfare
Sacramento, California

ADMINISTRATIVE EXPENSE AFFIDAVIT

AID TO NEEDY CHILDREN

FROM _____ COUNTY

MONTH OF _____, 19__, _____ FISCAL YEAR
(For State Use Only)

(Do Not Write in These Spaces)

1. Total Administrative Expense incurred for Children under the Aid to Needy Children Eligible Program accruing to the month covered by this report . . $_____

2. Administrative Expense incurred for all Children under the ANC-Eligible Program accrued to months prior to the month covered in Item 1:

Month _____ 19 _____ $_____
Month _____ 19 _____ $_____
Month _____ 19 _____ $_____
Month _____ 19 _____ $_____
Month _____ 19 _____ $_____
Month _____ 19 _____ $_____

3. Total accruals for all months covered by this report (sum of Item 1 and 2) $_____

4. Total amount due the county from the State for Administrative Expense incurred for the ANC-Eligible program. (Fifty percent of Item 3). . . . . $_____

FOR STATE USE ONLY

5. Federal Share of Adjustments for Administrative Expense for Children's cases Eligible to Federal participation (This item for State use only) . . . . . $_____

6. Adjusted amount due from Federal funds for Administrative Expense for Aid to Needy Children (Item 4 Plus or Minus Item 5) (This item for State use only). . . . . $_____

STATE OF CALIFORNIA

COUNTY OF _____ ss

I, _____, BEING DULY SWORN, DEPOSE AND SAY: THAT I am the County Official Responsible for the Administration of Aid to Needy Children in and for the said County; That all of the Provisions of Chapter I of Part 2 of Division II of the Welfare & Institutions Code, and Amendments Thereto, and Title IV of the Social Security Act, and Amendments Thereto, Have Been Complied With to the Best of my Knowledge and Belief; That the Above Expenditures Were Incurred in Administering, or Were Allocated to, Such Program; That With Regard to Expenditures for Salaries & Wages Included Herein all Employments and Rates are Correctly Shown and are Based Upon Authorization in Compliance With the Requirements of the Rules for a Merit System of Personnel Administration of the State Public Assistance Program as Authorized in Division I, Chapter I, Section 119.5 of the Welfare & Institutions Code, and Amendments Thereto.

SUBSCRIBED AND SWORN TO BEFORE ME THIS _____ DAY

of _____, 19 _____

_____
TITLE _____

_____
SIGNATURE OF WELFARE DIRECTOR OR OFFICIAL IN CHARGE

TITLE _____

APPROVED _____
CHAIRMAN, BOARD OF SUPERVISORS

I HEREBY CERTIFY, That Warrants Have Been Issued, or Expenditures Otherwise incurred in Settlement of the Administrative Expenses reflected in this Affidavit.

_____
SIGNATURE OF COUNTY AUDITOR

Form CA 807, Revised January 1949
CHILDREN'S ADMINISTRATIVE EXPENSE AFFIDAVIT
TO ACCOMPANY MONTHLY ADMINISTRATIVE
EXPENSE WORKSHEETS

Certified as a Regulati (or
Regulations) of the

Dept of Social Welfare
(Name of State Agency)

Myrtle Williams
(Signature)

Director
(Title)

1-19-49
(Date)

CHARLES M. WOLLENBERG
Director

EARL WARREN
Governor

STATE OF CALIFORNIA
DEPARTMENT OF SOCIAL WELFARE
616 K STREET
SACRAMENTO 14

December 31, 1948

FILED
in the office of the Secretary of State
of the State of California
JAN 21 1949
At 4 o'clock P. M.
FRANK M. JORDAN, Secretary of State
By Robert T. Jordan
Assistant Secretary of State

DEPARTMENT BULLETIN NO. 342 (OAS, Security for the Blind)

TO: COUNTY BOARDS OF SUPERVISORS
COUNTY AUDITORS
COUNTY WELFARE DEPARTMENTS

Subject: Old Age Security Permanent Sample Schedule, and Social Data Record Card - Security for the Blind

Revisions of instructions for reporting on the Old Age Security Permanent Sample Schedule (Form Ag 251) and on the Social Data Record Card - Aid to the Blind (Form Bl-230) for Security for the Blind cases made necessary by Article XXV of the California Constitution are outlined below. There is no change in the instructions for Social Data Record Cards for APSB and ANC.

Old Age Security Permanent Sample Schedule (Form Ag-251)

Sections 290-00 through 299-99 of the Manual of Policies and Procedures remain in effect except as follows. For cases with approvals or reinvestigations on or after January 1, 1949, the following changes in instructions shall be effective.

In Section 292-03 (Item G, Date of Approval) and Section 292-65 (Item V, Amount of Current Grant) reference to the county board of supervisors is to be changed to local Deputy Director SDSW for applications approved on or after January 1, 1949.

Since W&IC 2163, 2163.6, and 2163.7 have been modified by Article XXV of the California Constitution, the determination as to whether property is to be considered exempt for purposes of Section 292-40 (Item Q, Personal Property) and Section 292-45 (Item R, Life Insurance or Burial Trust) shall be made according to the provisions of Department Bulletin No. 333 (see pages 3 and 4).

Social Data Record Card - Security for the Blind (Form Bl-230)

Section 285-00 through 287-90 of the Manual of Policies and Procedures remain in effect except that the following changes shall be effective with respect to Social Data Record Cards for recipients of Security for the Blind (formerly ANB) whose grants are approved on or after January 1, 1949.

Since W&IC 3047 has been modified by Article XXV of the California Constitution, the determination as to whether insurance is to be considered exempt for purposes of Section 287-59 (Item 22, Life Insurance) and Section 287-75 (Item 21, Personal Property) shall be made according to the provisions of Department Bulletin No. 334 (see pages 6 through 9).

In Item 5, Date of this Approval, the date shall be the date of approval by the local Deputy Director SDSW rather than by the county board of supervisors.

Very sincerely yours,

C. M. Wollenberg

CHARLES M. WOLLENBERG, Director
Department of Social Welfare

TITLE 23 [illegible]

Certified as a Regulat[illegible] (or
Regulations) of the

Dept of Social Welfare
(Name of State Agency)

Myrtle Cressman
(Signature)

Director
(Title)

1-19-49
(Date)

W&IC 114b, 115, 116, 1569
3460

CHARLES M. WOLLENBERG
Director

EARL WARREN
Governor

STATE OF CALIFORNIA
DEPARTMENT OF SOCIAL WELFARE
616 K STREET
SACRAMENTO 14

December 30, 1948

FILED
in the office of the Secretary of State
of the State of California

JAN 21 1949

At 4 o'clock P. M.
FRANK M. JORDAN, Secretary of State
By Robert T. Jordan
Assistant Secretary of State

DEPARTMENT BULLETIN NO. 341 (Fiscal)

TO: COUNTY BOARDS OF SUPERVISORS
COUNTY AUDITORS
COUNTY WELFARE DEPARTMENTS

Subject: Constitutional Amendment - Aged and Blind Security Programs

Your county has entered into contract with the State Department of Social Welfare to administer the Aged and Blind Security Programs effective January 1, 1949.

In making this agreement, the county materially assists in assuring the aged and blind of this State that assistance shall be administered promptly.

To eliminate or avoid delay, the following regulations shall be adhered to by county welfare departments. (Separate instructions are being issued to county auditors by the State Controller.)

1. Approval of Estimates and Claims

Section 6 of the agreement provides that the board of supervisors of the county shall estimate the monthly amount of administrative costs and expenses the county will incur each month.

This section 6 further provides that the county shall withdraw monthly from said funds so advanced such amounts as may be necessary to pay administrative costs and expenses incurred during such month.

Question has been raised as to whether or not board of supervisors' action is required on estimates and claims. The following regulations apply:

ESTIMATES:

The board of supervisors may adopt a resolution authorizing a county official other than a board member to sign the monthly estimates and any supplemental estimates required. A copy of the board resolution shall be filed with the State Department of Social Welfare immediately after adoption.

CLAIMS:

The board of supervisors may adopt a resolution authorizing a county official other than a board member to sign the monthly claims submitted to the State Department of Social Welfare as a credit against sums advanced for Aged and Blind Security payments and for administrative costs. A copy of the resolution shall be filed with the State Department of Social Welfare immediately after adoption.

Estimates of expenditures for aid and administration for Aid to Needy Children and Aid to Partially Self-Supporting Blind will be filed quarterly in accordance with procedures in effect on and prior to December 1, 1948. See Manual of Policies and Procedures, Sections 601-00 through 601-99.

Quarterly adjustment of funds will continue to be made for Aid to Needy Children and Aid to Partially Self-Supporting Blind in accordance with procedures in effect on and prior to December 1, 1948.

2. Request for Additional Funds

Whenever a county finds it has insufficient funds for the payment of security and/or administration it may secure additional funds by completing a supplemental estimate and forwarding it to the State Department of Social Welfare.

Such supplemental estimate shall be submitted on the regular estimate forms, Ag 809-A, Old Age Security--Claim for Estimated Expenditures, and/or Bl 809-A, Security for the Blind--Claim for Estimated Expenditures, and shall be accompanied by a statement setting forth the reason(s) for the shortage.

3. Filing of Claims - Administration

A ruling has been received to the effect that effective December 1, 1948, all claims filed with the State Department of Social Welfare for reimbursement of administrative costs shall be on the basis of bills paid but segregated according to the month to which the benefit of the expenditure accrues.

For example: The January main claim will include, under Salaries and Wages, services rendered in January but paid for in January or in February up to the time the main claim is prepared. As administrative expense claims must be submitted to the State Department of Social Welfare by the 10th day following the month for which claim is made, supplemental January claims will be filed for all January services paid for after the main January claim has been filed. These supplemental January claims will be attached to, and become a part of, the February claim.

Claims shall be filed by each county in accordance with established procedures modified to the extent of increased participation and revised claim procedures as outlined below:

a. Increased Participation

Effective December 1, 1948, the State will reimburse 100% of the cost incurred by the county in accordance with terms of the agreement in administering the Aged and Blind Security Programs. The administration of Aid to the Partially Self-Supporting Blind is not a part of the agreement and is not reimbursable as such under this provision.

b. Revised Claim Procedure

County welfare departments shall, beginning with the claim for December 1948, file claims for administrative expense for the Aged and Blind Security, Aid to the Partially Self-Supporting Blind, Aid to Needy Children, Child Welfare Services, Boarding Home Aged, Boarding Home Children, Adoptions, and other programs as may be administered by them as follows:

(1) For Salarie nd Wages on the basis of the m n in which the services were render for maintenance and operation and capital outlay expenditures readily identifiable with a specific month will be reported on the basis of the month in which the expenditure is identifiable; for maintenance and operation and capital outlay not readily identifiable with a specific month on the basis of the month in which payment is made. Claim may not be made for any expenditure until it has either been paid or cleared by intra-county billing. In some counties supplies are secured from the Purchasing Agent or through a Stores System. The county shall, for claim purposes, use the month of billing by the Purchasing Agent or Stores Department as the month of expenditure, unless the accrual month is specified.

Example: In preparing the December 1948 claim, the following expenditures were to be considered:

(a) Salaries and wages for December paid January 3, 1949.
(b) Pencils, ink, typewriter ribbons, and miscellaneous forms ordered and received during November and December but paid during December 1948.
(c) November 1948 rent paid in December 1948.

In preparing the claim for the month of December 1948, all salaries and wages paid on January 3, 1949, will be included in the December 1948 claim as the services were actually rendered during the month of December 1948. Maintenance and operation expenditures paid during December 1948 and not readily identifiable with a specific month, such as pencils, ink, typewriter ribbons, etc., listed under (b) above, will be charged against the month of December 1948, the month in which payments were made. The expenditure for November 1948 rent paid in December 1948 will be charged against the month of November 1948, as this is an expenditure readily identifiable with a specific month.

(2) Services of other county agencies (excluding those billed the State Controller) may be included in the welfare claim when reimbursement has not been requested from any other state department and the county has met all conditions relating to (1) immediately above and general plan requirements. Other county agencies need not officially "bill" the welfare agency for claim purposes. The county will continue to show on the Welfare Department's administrative expense claim services of other county departments, including the county auditor's office for warrant writing and other services for Aid to Needy Children. The guide will be to continue claiming as in the past for all expenses except for those which are being reimbursed by another department of State government. Counties are cautioned that fiscal exceptions are being recorded to claims for warrant writing services and expenses of other agencies where supporting data is not on file in the county.

Counties claiming participation for expenses of county auditor shall refer to State Department of Social Welfare Manual of Policies and Procedures, Section 645-27. Attention is called to the fact that if claim is made on a unit cost basis, the county shall, at least once but not more than twice each fiscal year, conduct a study to establish a new unit cost or verify existing costs.

Counties will nd it necessary in many instan to file each month:

Main Claims which will include all expenditures for salaries and wages for which services were performed for such month and for which payment has been made; and expenditures for maintenance and operation and capital outlay for which payment was made in accordance with instructions contained in preceding pages.

Supplemental Claims which will include all cash expenditures for salaries and wages for which services were performed in a month prior to that shown on the main claim; and cash expenditures for maintenance and operation and capital outlay, which cash expenditures were identifiable with or were made in a prior month but were not included in that month's claim in accordance with instructions contained in preceding pages.

State field audits will make necessary adjustments for initial claims filed under the revised procedures.

4. Time Recordings

It is necessary that counties add to their time records the new program classification "aged-Ineligible". Time and expense will be charged to this category whenever it is expended on behalf of recipients ineligible to federal participation.

The Administrative Expense Affidavits, 807, are revised to show expenses accruing to the month covered by the Main Claim, together with space for reporting supplemental claims for months subsequent to November 30, 1948, and months prior to December 1, 1948.

Other changes in regulations regarding time recording and also effective January 1, 1949, are:

1. Federal regulations provide that time recorded on Daily Time Sheets must be to the nearest 15 minute intervals rather than 30 as now provided.

5. Costs to be Included in Claim

In the agreement between the county and the state, the board of supervisors of each county is designated as the single agency responsible for supervising county performance.

The State Department of Social Welfare looks to the county board of supervisors to determine the personnel, quarters, services, supplies and equipment necessary for the administration of the Aged and Blind Security Programs.

Where it is found by the board of supervisors that equipment costing more than $500 per item is necessary, the State Department of Social Welfare should be notified at once by the board of supervisors or its delegated agent as to the items necessary and the reason for the expenditure.

As soon as official notification is given the county as to approval, the board of supervisors should then cause the amount approved to be included in the monthly claim in which the cash outlay will be made. In the agreement

entered into, it is stated that the State Department of Finance's approval is required. All requests should be forwarded to the State Department of Social Welfare and this department will be responsible for securing and notifying the county of the Department of Finance's action.

6. Payment of Administrative Costs

Counties will continue to pay expenses of administration (salaries, maintenance, supplies, etc.) in accordance with procedures in effect prior to December 1, 1948. The only change will be that the county will claim reimbursement under the increased ratio of participation.

Effective December 1, 1948, expenses for Aged and Blind Security of county auditors, county treasurers, etc., formerly included in the county welfare department's administrative expense claim will now be deleted and will be claimed directly from the State Controller. The county welfare department will include, in its monthly administrative expense claim, expenses incurred through their appropriation or expenses of other county agencies directly identifiable with welfare employees. Counties will continue to charge the State Department of Social Welfare for such expenses incurred on behalf of the Aid to Needy Children Program.

7. Inventory Records of Property Acquired from State Funds

County shall maintain accurate and complete records of all personal property purchased by the county in whole or in part from state funds on and after December 1, 1948. The records shall indicate the article purchased, warrant number, date and amount of purchase, serial number of the article or description and any other identifying information felt necessary such as location, etc.

"Personal Property" as referred to herein means non-expendable property which is of a permanent character or whose useful life is of long duration.

Where the amount of the expenditure or the amount allocated to Aged and Blind Security (excluding Aid to Partially Self-Supporting Blind) is $5.00 or more for each item, the item shall be reflected on appropriate inventory records.

Equipment comprises those movable articles which can be used repeatedly without appreciable impairment of physical condition. Examples: desks, chairs, typewriters, lamps, desk sets, rugs, automobiles, books, staplers, trays, etc.

Supplies are commodities for which no inventory record need by kept and represent commodities consumed by use, such as stationery, fuel, forms, pencils, etc.

Counties will itemize monthly on Form DFA 64-E, Inventory Record of Property Acquired from State Funds, all personal property expenditures during the month which cost $5.00 or more per item. The possession, control of and such title as the county may have in any property purchased for use of the county and recorded on this form shall, upon termination of the agreement between the county and the state, be surrendered to the state.

The county should determine that only non-expendable property is listed on Form DFA 64-E. Do not list supplies such as forms, pencils, stationery, etc.

These are expenda items which are not regarded as personal property within the meaning of this regulation.

8. Repairs and Alterations

Repairs and Alterations are defined as improvements or structural changes in a building resulting in a better piece of property in the sense of greater durability or increased efficiency. State Department of Social Welfare Form DFA-117, Request for Approval of Repairs and Alterations, must be submitted to the State Department of Social Welfare in advance and approval must be given the county before expenditures are made. See State Department of Social Welfare Manual of Policies and Procedures, Section 645-37 for full detail.

Counties will not be reimbursed in full at one time as in the past, but will receive federal and state participation in expenditures for approved repairs and alterations on an amortized basis.

In those counties claiming maintenance and service in lieu of rent the approved amount of monthly amortization will be added to the net amount claimed each month for maintenance and service in lieu of rent.

In those counties for which no claim for maintenance and service in lieu of rent is made, the approved amount of amortization will be shown on the worksheet, Form DFA 64-B, under Capital Outlay and designated as "Repairs and Alterations."

9. Forms

The following forms are now being revised:

DFA 64, Worksheet for Allocation of Expenditures Based on Results of Time Recording for Salaries and Wages Only

DFA 64-A, Worksheet for Allocation of Expenditures Based on Results of Time Recording for Maintenance and Operation and Capital Outlay.

Counties will use present supplies, changes as necessary, and will receive revised forms in the near future.

Very sincerly yours,

Chas. Wollenberg

CHARLES M. WOLLENBERG, Director
Department of Social Welfare

STATE OF CALIFORNIA

INVENTORY RECORD OF PROPERTY
ACQUIRED FROM STATE FUNDS

SUBMIT 4 COPIES TO
STATE DEPARTMENT OF SOCIAL WELFARE

COUNTY OF_____

(To Accompany Administrative Expense Worksheets, Forms DFA 64 & 64A)

WARRANT NUMBER (1)	DATE OF WARRANT (2)	ARTICLE PURCHASED (3)	COST OF ARTICLE (4)	SERIAL NUMBER (5)	COUNTY INVENTORY NO. (6)	REMARKS (Show "Location" if Possible) (7)

Form DFA 64E, December 1948

TITLE 22-CA 2

Certified as a Reg tion (or Regulations) of the

Dept of Soc. Welfare
(Name of State Agency)

Myrtle Williams
(Signature)

Director
(Title)

1-19-49
(Date)

TITLE 22 - 42

MAIN OFFICE
SACRAMENTO
616 K STREET
14

LOS ANGELES OFFICE
MIRROR BUILDING
145 SOUTH SPRING STREET
12

SAN FRANCISCO OFFICE
GRAYSTONE BUILDING
948 MARKET STREET
2

STATE OF CALIFORNIA

Department of Social Welfare

MYRTLE WILLIAMS
DIRECTOR

Sacramento 14
January 19, 1949

Hon. Frank M. Jordan
Secretary of State
Room 109, State Capitol
Sacramento, California

FILED
in the office of the Secretary of State
of the State of California

JAN 21 1949

At 4 o'clock P. M.

FRANK M. JORDAN, Secretary of State

By Robert E. Jordan
Assistant Secretary of State

IN REPLY PLEASE REFER TO:

My dear Mr. Jordan:

Attached are three copies of the regulations issued by the State Department of Social Welfare:

DEPARTMENT BULLETIN NO. 339 (Emergency Regulation)
DEPARTMENT BULLETIN NO. 341 (Emergency Regulation)
DEPARTMENT BULLETIN NO. 342 (Emergency Regulation)
DEPARTMENT BULLETIN NO. 343 (Emergency Regulation)
DEPARTMENT BULLETIN NO. 344 (Emergency Regulation)
DEPARTMENT BULLETIN NO. 345 (Emergency Regulation)
DEPARTMENT BULLETIN NO. 346 (Emergency Regulation)
DEPARTMENT BULLETIN NO. 347 (Emergency Regulation)
DEPARTMENT BULLETIN NO. 348 (Emergency Regulation)

These regulations were issued by the State Department of Social Welfare pursuant to the powers conferred upon it by the Welfare and Institutions Code under Sections 103.5, 114, 115, 116, 1560, 3460 and are being filed in accordance with Section 11380 of the Government Code.

These regulations are to be effective immediately upon filing with the Secretary of State, since this has been found necessary for the immediate preservation of the public peace, health and safety or general welfare and that notice and public procedure thereon are impracticable, unnecessary or contrary to the public interest.

Very sincerely yours,

Myrtle Williams

MYRTLE WILLIAMS, Director
Department of Social Welfare

468:b5
Attachments

Certified as a Regul on (or Regulations) of the

Dept of Soc. Wel.
(Name of State Agency)

Phyllis Williams
(Signature)

Director
(Title)

1-19-49
(Date)

CHARLES M. WOLLENBERG
Director

EARL WARREN
Governor

WIC 114, 115, 3460

STATE OF CALIFORNIA
DEPARTMENT OF SOCIAL WELFARE
616 K STREET
SACRAMENTO 14

December 30, 1948

DEPARTMENT BULLETIN NO. 339(Stat.)

TO: COUNTY BOARDS OF SUPERVISORS
COUNTY AUDITORS
COUNTY WELFARE DEPARTMENTS

Subject: Monthly Statistical Reports on Old Age Security, Security for the Blind, and Aid to Partially Self-supporting Blind Residents.

Forms Ag 237 and Bl 237, monthly statistical reports, have been revised and simplified, and provision has been made for reporting on APSB on a separate form, APSB 237. Beginning with the reports covering the month of January 1949 (due not later than February 8), monthly statistical reports shall be submitted on Form Ag 237 (Revised December 1948), Form Bl 237 (Revised December 1948), and Form APSB 237, on Old Age Security, Security for the Blind, and Aid to Partially Self-supporting Blind Residents, respectively, in accordance with attached instructions.

Instructions contained in Manual Section 510-00 through 563-54 are hereby canceled so far as they relate to Forms Ag 237 and Bl 237, but remain fully effective otherwise.

In respect to the application movement section (Section A) of all three reports, please note that restorations by means of a Notice of Change (Form Ag, Bl, and APSB 232) and inter-county transfers are no longer to be reported as applications but are to be added to the caseload by reporting in Item 8 and Item 9 respectively.

Provision has been made on Form Ag 237 (Revised December 1948) for reporting the number of pending OAS applications of persons less than 65 years of age and the number of OAS recipients less than 65 years of age.

Revised instructions and sample forms are attached to this bulletin. A supply of revised monthly statistical report forms are being mailed under separate cover.

Very sincerely yours,

Chas. M. Wollenberg

CHARLES M. WOLLENBERG, Director
Department of Social Welfare

FILED
in the office of the Secretary of State
of the State of California

JAN 21 1949

At 4 o'clock P. M.
FRANK M. JORDAN, Secretary of State
By Robert T. Jordan
Assistant Secretary of State

Attachments

INSTRUCTIONS FOR COMPLETION OF MONTHLY
STATISTICAL REPORT ON OLD AGE SECURITY - FORM AG-237
(REVISED DECEMBER 1948)

General

Monthly Statistical Reports on Old Age Security (Form Ag-237, Revised December 1948) shall be submitted to the State Department of Social Welfare by all counties every month.

Form Ag-237 (Revised December 1948) is to be used effective with the report covering the month of January 1949. Reports are due each month not later than the 8th of the month following the month covered by the report. A copy of the report should be retained by the county.

The monthly statistical report on OAS, Form Ag 237 (Revised December 1948), is designed to report applications and case movement and the obligations incurred for Old Age Security.

The report is divided into 4 sections:

A - Application Movement
B - Case Movement
C - Obligations Incurred
D - Recipients Under 65 years of age

Application disposals (Items 4, 4A, 4B, 4C, and 7), restorations (Item 8), transfers (Item 9), and discontinuances (Item 11) shall be reported for the month when such action was taken by the local Deputy Director SDSW rather than for the month in which the action becomes effective (if these months differ). The single exception to this rule is noted under Item 8.

Section A - Application Movement

This section is designed to report the movement of applications (Form Ag-200 or AB-200-B actually signed by the applicant or his authorized representative). Excluded from Section A are restorations authorized by means of a Notice of Change (Form Ag-232). These cases are to be reported under Item 8 of Section B. Also excluded from Section A, are transfers from another county even though a Form Ag-200 or AB-200-B may have been signed by the applicant or his authorized representative. These cases are to be reported under Item 9 of Section B.

Item 1. Applications Pending From Preceding Month - Enter the number of applications previously received which had not been disposed of by the end of the preceding month. This entry should agree with Item 5 of the previous month's report. If Item 5 of the previous month's report is found to be in error, then the correct figure should be shown in Item 1. An explanation of the difference should be made on the reverse side of the report form.

Item 2. Applications Received During Month - Enter the number of applications (Forms Ag-200 or AB-200-B) which have been signed during the month. Applications include:

(1) Applications signed by persons who have never previously applied for OAS.

(2) Applicati signed by persons who have pr usly applied but withdrew their applications or had their applications denied or canceled for some other reason.

(3) Reapplications (Form Ag-200 or AB-200-B signed by the applicant or his authorized representative by persons who are seeking restoration of OAS which was terminated 12 months or more prior to date of reapplication, or by persons who for some technical reason are required to sign an application form to effect a restoration of OAS.

(4) Applications made by authorized representative (Form AB-200-B). To avoid duplication exclude applications (Form Ag 200) subsequently signed by applicant.

Item 3. Total Applications During Month - Enter the sum of Items 1 and 2.

Item 4. Applications Disposed of During Month - Enter the total number of applications removed from the application count during the month because they were granted, denied, withdrawn, or canceled. Adjustments to correct errors in the application count are not to be made in this item but in Item 1. Item 4 is the sum of Items 4A, 4B, and 4C.

Item 4A. Applications Granted - Enter the number of applications for OAS granted by action of the local Deputy Director SDSW during the month.

Item 4B. Applications Denied - Enter the number of applications for OAS denied by action of the local Deputy Director SDSW during the month.

Item 4C. Applications Withdrawn or Canceled - Enter the total number of OAS applications withdrawn by applicants during the month or canceled because the applicants have died or their whereabouts are unknown. Adjustments to correct errors in the application count are not to be made in this item but in Item 1.

Item 5. Applications Pending at End of Month - Enter the number of applications on file on the last day of the month which are awaiting decision in respect to eligibility for OAS. This item is the sum of Items 5A and 5B.

Item 5A. Applications Pending for Persons 65 Years and Over - Enter the number of applications of persons aged 64 years and 10 months or over (on date of application) pending action on the last day of the month.

Item 5B. Applications Pending for Persons Under Age 65 Years - Enter the number of applications of persons less than 64 years and 10 months of age (on date of application) pending action on the last day of the month.

Section B - Cases

Item 6. Cases Continued from Preceding Month - Enter the number of authorized cases whose OAS had not been terminated by the end of the preceding month. This entry should agree with Item 12 of the preceding month's report. If Item 12 of the preceding month was found to be in error, the correct figure should be shown here (Item 6). An explanation of the difference should be made on the reverse side of the report.

Item 7. Applications Granted During the Month - Enter the figure shown in Item 4A.

Item 8. Cases Restored During Month - Enter the number of cases restored to OAS by action of the local Deputy Director SDSW on Notice of Change (Form Ag-232) during the month. Report restorations in the month in which action was taken by the local Deputy Director SDSW except when an automatic restoration is authorized at the time of discontinuance. In the latter case report the restoration in the month in which it becomes effective.

Item 9. Cases Transferred from Another County During Month - Enter the number of OAS cases for whom responsibility for payment was transferred from another county during the month.

Item 10. Total Cases Active During Month - Enter the sum of Items 6, 7, 8, and 9. This item is also the sum of Items 10A and 10B.

Item 10A. Warrant Issued - Enter the number of persons who received OAS during the month for this month. Exclude cases who did not receive OAS because their warrants for the month were not written or were canceled, "held", or suspended.

Item 10B. Warrant Not Issued - Enter the number of OAS cases to whom warrants were not issued during the month. Include cases for whom warrants were not written or whose warrants were canceled, "held", or suspended.

Item 11. Cases Discontinued During Month - Enter the number of cases whose OAS was terminated by action of the local Deputy Director SDSW on Notice of Change (Form Ag-232) during the month regardless of the effective date on the Notice of Change. Include cases for whom responsibility for payment was transferred to another county.

Item 12. Cases Continued to Next Month - Enter the number of cases which, on the last day of the month, appeared eligible for the next month's grant, or which have not been formally discontinued by action of the local Deputy Director SDSW. This count equals Item 10 minus Item 11.

Section C. - Obligations Incurred for OAS

This section is designed to report the amount of OAS paid to recipients during the month for that month and the amounts to be paid from Federal and State funds. Exclude retroactive payments and current warrants which were canceled, "held", or suspended. Any assistance from county General Relief funds to recipients of OAS shall be reported on Form GR-237.

Item 13. Total Obligations - Enter the total amount of OAS paid for the month being reported.

Item 13A. Federal Share - Enter the amount of OAS reported in Item 13 to be paid from Federal funds.

Item 13B. State Share - Enter the amount of OAS reported in Item 13 to be paid from State funds.

Section D. - Recipients Under 65 Years of Age Included in Item 10A

Enter the number of recipients included in Item 10A who were less than 65 years of age at the time the warrant was issued. Include all recipients who have not reached their 65th birthday. (Note that this differs from the definition in Item 5B.)

Item 8. Cases Reopened During Month - Enter the number of cases restored to OAS by action of the Local Public Welfare Board on Notice of Change (Form AA-122) during the month. Report case reopenings in the month in which action was taken by the Local Public Welfare Board even when an automatic reinstatement is authorized at the time of discontinuance. In the latter case report the reinstatement in the month in which it becomes effective.

Item 9. Cases Transferred from Another County During Month - Enter the number of OAS cases for which responsibility for payment was transferred from another county during the month.

Item 10. Total Cases Active During Month - Enter the sum of Items 6, 7, 8, and 9. This item is also the sum of Items 10a and 10b.

Item 10a. Warrant Issued - Enter the number of persons who received OAS during the month for this report. Exclude cases who did not receive their warrants for the month because they were cancelled, "held", or suspended.

Item 10b. Warrant Not Issued - Enter the number of OAS cases to whom warrants were not issued during the month. Include cases for whom warrants were not written or whose warrants were cancelled, "held", or suspended.

Item 11. Cases Discontinued During Month - Enter the number of cases whose OAS was discontinued by action of the Local Public Welfare Board on Notice of Change (Form AA-122) during the month regardless of the effective date of the notice of change. Include cases for which responsibility for payment was transferred to another county.

Item 12. Cases Continued to Next Month - Enter the number of active cases on the last day of the month, that is, cases eligible for the next month's grant, or which have not been formally discontinued by action of the Local Public Welfare Board. This figure equals Item 10 minus Item 11.

Section C. - Obligations Incurred for OAS

This section is designed to report the amount of OAS paid to recipients during the month, [illegible] the amounts to be paid from Federal and State funds, [illegible] respective [illegible] payments and [illegible] warrants [illegible]. [illegible] the County General Relief Committee [illegible] of the County.

Item 13. Total Obligations - Enter the total amount of original grants being issued.

Item 14. Federal Share - Enter the amount of OAS reported in Item 13 to be paid from Federal Funds.

Item 15. State Share - Enter the amount of OAS reported in Item 13 to be paid from State Funds.

Section D. - Recipients Under 65 Years of Age Included in Item 12.

Enter the number of recipients included in Item 12 who were under 65 years of age at the time the assistance was issued. Include all recipients [illegible] Item 12.

MONTHLY STATISTICAL REPORT ON OLD AGE SECURITY

COUNTY _____ REPORT FOR THE MONTH OF _____ 19 ____

SECTION A - APPLICATIONS:

1. Pending from preceding month (Item 5 last month) . . . . . _____
2. Received during month. . . . . _____
3. Total during month (Item 1 + 2). . . . . _____
4. Disposed of during month . . . . . _____
   a. Granted (Item 7) . . . . . _____
   b. Denied . . . . . _____
   c. Withdrawn or canceled. . . . . _____
5. Pending at end of month (Item 1 next month). . . . . _____
   a. 65 years and over (Include 64 years 10 months) . . . . _____
   b. Under 65 years (Exclude 64 years 10 months). . . . . _____

SECTION B - CASES:

6. Continued from preceding month (Item 12 last month). . . . _____
7. Applications granted during month (Item 4A). . . . . _____
8. Restored during month. . . . . _____
9. Transferred from another county during month . . . . . _____
10. Total active during month (Item 6 + 7 + 8 + 9) . . . . . _____
    a. Warrant issued . . . . . _____
    b. Warrant not issued . . . . . _____
11. Discontinued during month. . . . . _____
12. Continued to next month (Item 6 next month). . . . . _____

SECTION C - OBLIGATIONS INCURRED:

13. Total. . . . . $ _____
    A. Federal share. . . . . $ _____
    B. State share. . . . . $ _____

SECTION D - RECIPIENTS UNDER 65 YEARS OF AGE:

14. Recipients under 65 years of age included in Item 10A. . . _____

(Signature of Reporting Officer) _____ (Title) _____

(Date) _____ 19 ____

Form Ag 237, Revised December 1948

INSTRUCTIONS FOR COMPLETION OF
MONTHLY STATISTICAL REPORT ON SECURITY FOR THE BLIND -
FORM BL-237 (REVISED DECEMBER 1948)

General

Monthly Statistical Reports on Security for the Blind (Form Bl-237, Revised December 1948) shall be submitted to the State Department of Social Welfare by all counties every month. Form Bl-237 (Revised December 1948) is to be used effective with the report covering the month of January 1949. Reports are due each month not later than the 8th of the month following the month covered by the report. A copy of the report should be retained by the county.

The monthly statistical report on Security for the Blind is designed to report applications and case movement and the obligations incurred for Security for the Blind.

The report is divided into 3 sections:

A - Application Movement
B - Case Movement
C - Obligations Incurred

Application disposals (Items 4, 4A, 4B, 4C, and 7), restorations (Item 8), transfers (Item 9), and discontinuances (Item 11) shall be reported for the month when such action was taken by the local Deputy Director SDSW rather than for the month in which the action becomes effective (if these months differ). The single exception to this rule is noted under Item 8.

Section A - Application Movement

This section is designed to report the movement of applications Form Bl-200 or AB-200-B actually signed by the applicant or his authorized representative. Excluded from Section A are restorations authorized by means of a Notice of Change (Form Bl-232). These cases are to be reported under Item 8 of Section B. Also excluded from Section A, are transfers from another county even though a Form Bl-200 or AB-200-B may have been signed by the applicant or his authorized representative. These cases are to be reported under Item 9 of Section B.

Item 1. Applications Pending From Preceding Month - Enter the number of applications previously received which had not been disposed of by the end of the preceding month. This entry should agree with Item 5 of the previous month's report. If Item 5 of the previous month's report is found to be in error, then the correct figure should be shown in Item 1. An explanation of the difference should be made on the reverse side of the report form.

Item 2. Applications Received During Month - Enter the number of applications (Form Bl-200 or AB-200-B) which have been signed during the month. Applications include:

(1) Applications signed by persons who have never previously applied for Security for the Blind (formerly ANB).

(2) Applications signed by persons who have previously applied but withdrew their applications, or had their applications denied or canceled for some other reason.

(3) Reapplications (Form B1-200 or AB-200-B signed by the applicant or his authorized representative) by persons who are seeking restoration of Security for the Blind (formerly ANB) which was terminated 12 months or more prior to date of reapplication, or by persons who for some technical reason are required to sign an application form to effect a restoration of their Security for the Blind (formerly ANB).

(4) Reapplications (Form B1-200 or AB-200-B signed by the applicant or his authorized representative) from individuals who are receiving assistance under the APSB program and who were transferred from Security for the Blind (formerly ANB).

(5) Applications made by authorized representative (Form AB-200-B). To avoid duplication exclude applications (Form B1-200) subsequently signed by applicant.

Item 3. Total Applications During Month - Enter the sum of Items 1 and 2.

Item 4. Applications Disposed of During Month - Enter the total number of applications removed from the application count during the month, because they were granted, denied, withdrawn, or canceled. Adjustments to correct errors in the application count are not to be made in this item but in Item 1. Item 4 is the sum of Items 4A, 4B, and 4C.

Item 4A. Applications Granted - Enter here the number of applications for Security for the Blind that have been approved by action of the local Deputy Director, SDSW during the month.

Item 4B. Applications Denied - Enter here the number of applications for Security for the Blind denied by action of the local Deputy Director SDSW during the month.

Item 4C. Applications Withdrawn or Canceled - Enter the total number of Security for the Blind applications withdrawn by applicants during the month or canceled because the applicants have either died or their whereabouts are unknown. Adjustments to correct errors in the application count are not to be made in this item but in Item 1.

Item 5. Applications Pending At End of Month - Enter here the number of applications on file on the last day of the month which are awaiting decision in respect to eligibility for Security for the Blind.

Section B - Case Movement

Item 6. Cases Continued from Preceding Month - Enter the number of authorized cases whose Security for the Blind had not been terminated by the end of the preceding month. This entry should agree with Item 12 of the preceding month's report. If Item 12 of the preceding month was found to be in error, the correct figure should be shown here (Item 6). An explanation of the difference should be made on the reverse side of the report.

Item 7. Applications Granted During the Month - Enter the figure shown in Item 4A.

Item 8. Cases Restored During Month - Enter the number of cases restored to Security for the Blind by action of the Deputy Director SDSW on Notice of Change (Form B1-232) during the month. Report restorations in the month in which action was

taken by the local Deputy Director SDSW except when an automatic restoration is authorized at the time of discontinuance. In the latter case, report the restoration in the month in which it becomes effective.

Item 9. Cases Transferred From Another County During Month - Enter the number of Security for the Blind cases for whom responsibility for payment was transferred from another county during the month.

Item 10. Total Cases Active During Month - Enter the sum of Items 6, 7, 8, and 9. This item is also the sum of Items 10A and 10B.

Item 10A. Warrant Issued - Enter the number of persons who received Security for the Blind during the month for this month. Exclude cases who did not receive Security for the Blind because their warrants for the month were not written or were canceled, "held," or suspended.

Item 10B. Warrant Not Issued - Enter the number of Security for the Blind cases to whom warrants were not issued during the month. Include cases for whom warrants were not written or whose warrants were canceled, "held," or suspended.

Item 11. Cases Discontinued During Month - Enter the number of cases whose Security for the Blind was terminated by action of the local Deputy Director SDSW on Notice of Change (Form B1-232) during the month regardless of the effective date on the Notice of Change. Include cases for whom responsibility for payment was transferred to other counties and to other types of public assistance.

Item 11A. Cases Discontinued - Transferred to APSB - Enter the number of cases whose Security for the Blind was terminated because the recipient was transferred to the APSB program.

Item 11B. Cases Discontinued for Other Reasons - Enter the number of cases whose Security for the Blind was terminated for some reason other than transfer to APSB.

Item 12. Cases Continued to Next Month - Enter the number of cases which on the last day of the month appeared eligible for the next month's grant, or which have not been formally discontinued by action of the local Deputy Director SDSW. This county equals Item 10 minus Item 11.

Section C. Obligations Incurred for Security for the Blind.

This section is designed to report the amount of Security for the Blind paid to recipients during the month for that month and the amounts to be paid from Federal and State funds. Exclude retroactive payments and current warrants which were canceled "held," or suspended. Any assistance from county General Relief funds to recipients of Security for the Blind shall be reported on Form GR-237.

Item 13. Total Obligations - Enter the total amount of Security for the Blind paid for the month being reported.

Item 13a. Federal Share - Enter the amount of Security for the Blind reported in Item 13 to be paid from Federal funds.

Item 13b. State Share - Enter the amount of Security for the Blind reported in Item 13 to be paid from State funds.

MONTHLY STATISTICAL REPORT ON SECURITY FOR THE BLIND

COUNTY _____ REPORT FOR THE MONTH OF _____ 19____

SECTION A - APPLICATIONS:

1. Pending from preceding month (Item 5 last month) . . . . . _____
2. Received during month. . . . . _____
3. Total during month (Item 1 + 2). . . . . _____
4. Disposed of during month . . . . . _____
   a. Granted (Item 7) . . . . . _____
   b. Denied . . . . . _____
   c. Withdrawn or canceled. . . . . _____
5. Pending at end of month (Item 1 next month). . . . . _____

SECTION B - CASES:

6. Continued from preceding month (Item 12 last month). . . . _____
7. Applications granted during month (Item 4A). . . . . _____
8. Restored during month. . . . . _____
9. Transferred from another county during month . . . . . _____
10. Total active during month (Item 6 + 7 + 8 + 9) . . . . . _____
    a. Warrant issued . . . . . _____
    b. Warrant not issued . . . . . _____
11. Discontinued during month. . . . . _____
    1. Transferred to Aid to Partially Self-supporting Blind. _____
    2. Other. . . . . _____
12. Continued to next month (Item 6 next month). . . . . _____

SECTION C - OBLIGATIONS INCURRED:

13. Total. . . . . $ _____
    a. Federal share. . . . . $ _____
    b. State share. . . . . $ _____

(Signature of Reporting Officer) _____ (Title) _____

(Date) _____ 19____

Form Bl 237, Revised December 1948

INSTRUCTIONS FOR COMPLETION OF MONTHLY STATISTICAL REPORT ON AID TO PARTIALLY SELF-SUPPORTING BLIND RESIDENTS - FORM APSB-237
(December 1948)

General

Monthly Statistical Reports on Aid to Partially Self-supporting Blind Residents (Form APSB-237, December 1948) shall be submitted each month to the State Department of Social Welfare by all counties having APSB applications or cases. Form APSB-237 (December 1948) is to be used effective with the report covering the month of January 1949. Reports are due each month not later than the 8th of the month following the month covered by the report. A copy of the report should be retained by the county.

The monthly ststistical report on Aid to Partially Self-supporting Blind Residents is designed to report applications and case movement and the obligations incurred for APSB.

The report is divided into 3 sections:

A - Application Movement
B - Case Movement
C - Obligations Incurred

Application disposals (Items 4, 4A, 4B, 4C, and 7), restorations (Item 8), transfers (Item 9), and discontinuances (Item 11) shall be reported for the month when such action was taken by the local Deputy Director SDSW rather than for the month in which the action becomes effective (if these months differ). The single exception to this rule is noted under Item 8.

Section A - Application Movement

This section is designed to report the movement of applications (Form APSB-200 actually signed by the applicant). Excluded from Section A are restorations authorized by means of a Notice of Change (Form APSB-232). These cases are to be reported under Item 8 of Section B. Also excluded from Section A, are transfers from another county even though a Form APSB-200 may have been signed by the applicant. These cases are reported under Item 9 of Section B.

Item 1. Applications Pending from Preceding Month - Enter the number of applications previously received which had not been disposed of by the end of the preceding month. This entry should agree with Item 5 of the previous month's report. If Item 5 of the previous month's report is found to be in error, then the correct figure should be shown in Item 1. An explanation of the difference should be made on the reverse side of the report form.

Item 2. Applications Received During Month - Enter the number of applications (Form APSB-200) which have been signed during the month.

Applications include:

(1) Applications signed by persons who have never previously applied for APSB.

(2) Applications signed by persons who have previously filed but withdrew their applications or had their applications denied or canceled for some other reason.

(3) Reapplications (Form APSB-200 signed by the individual) by persons who are seeking restoration of APSB which was terminated 12 months or more prior to date of reapplication, or persons who for some technical reason are required to sign an application form to effect a restoration of their APSB.

(4) Reapplications (Form APSB-200 signed by the individual) from individuals who are receiving assistance under the Security for the Blind Program and who were transferred from APSB 12 months or more ago.

Item 3. Total Applications During Month - Enter the sum of Items 1 and 2.

Item 4. Applications Disposed of During Month - Enter here the total number of applications that have been removed from the application count during the month, because they were granted, denied, withdrawn or canceled. Adjustments to correct errors in the application count are not to be made in this item but in Item 1. Item 4 is the sum of Items 4A, 4B, and 4C.

Item 4A. Applications Granted - Enter here the number of applications for APSB that have been granted by action of the Board of Supervisors during the month.

Item 4B. Applications Denied - Enter here the number of applications for APSB denied by action of the Board of Supervisors during the month.

Item 4C. Applications Withdrawn or Canceled - Enter the total number of APSB applications withdrawn by the applicants during the month or canceled for some other reason, i.e., death or disappearance of applicant. Do not use this item to make adjustments in the application count; make any adjustment in Item 1.

Item 5. Applications Pending at End of Month - Enter here the number of applications on file on the last day of the month which are awaiting decision in respect to eligibility for APSB.

Section B - Case Movement

Item 6. Cases Continued from Preceding Month - Enter the number of authorized cases whose APSB had not been terminated by the end of the preceding month. This entry should agree with Item 12 of the preceding month's report. If Item 12 of the preceding month was found to be in error, the correct figure should be shown here (Item 6). An explanation of the difference should be made on the reverse side of the report.

Item 7. Applications Granted During the Month - Enter the figure shown in Item 4A.

Item 8. Cases Restored During Month - Enter the number of cases restored to APSB by action of the Board of Supervisors on Form APSB-232 during the month. Report restorations in the month in which action was taken by the Board of Supervisors except when an automatic restoration is authorized at the time of discontinuance. In the latter case report the restoration in the month in which it becomes effective.

Item 9. Cases Transferred from Another County During Month - Enter the number of APSB cases for whom responsibility for payment was transferred from another county during the month.

Item 10. Total Cases Active During Month - Enter the sum of Items 6, 7, 8, and 9. This item is also the sum of Items 10A and 10B.

Item 10A. Warrant Issued - Enter the number of persons who received APSB during the month for this month. Exclude cases who did not receive APSB because their warrants for the month were not written or were canceled, "held", or suspended.

Item 10B. Warrant Not Issued - Enter the number of APSB cases to whom warrants were not issued during the month. Include cases for whom warrants were not written or whose warrants were canceled, "held", or suspended.

Item 11. Discontinued During Month - Enter the number of cases whose APSB was terminated by action of the Board of Supervisors on Notice of Change (Form APSB-232) during the month regardless of the effective date on the Notice of Change. Include cases for whom responsibility for payment was transferred to other counties and to other types of public assistance.

Item 11A. Cases Discontinued - Transferred to Security for the Blind - Enter the number of cases whose APSB was terminated by action of the Board of Supervisors because the recipient was transferred to the Security for the Blind program.

Item 11B. Cases Discontinued for Other Reasons - Enter the number of cases whose APSB was terminated for some reason other than transfer to Security for the Blind.

Item 12. Cases Continued to Next Month - Enter the number of cases which on the last day of the month appeared eligible for the next month's grant, or which have not been formally discontinued by action of the Board of Supervisors. This county equals Item 10 minus Item 11.

Section C - Obligations Incurred for APSB

This section is designed to report the amount of APSB paid to recipients during the month for that month and the amounts to be paid from State and County funds. Exclude retroactive payments and current warrants which were canceled, "held", or suspended.

Item 13. Total Obligations - Enter the total amount of APSB paid for the month being reported.

Item 13A. State Share - Enter the amount of APSB reported in Item 13 to be paid from State funds.

Item 13B. County Share - Enter the amount of APSB assistance reported in Item 13 to be paid from County funds.

MONTHLY STATISTICAL REPORT ON
AID TO PARTIALLY SELF-SUPPORTING BLIND RESIDENTS

COUNTY _____ REPORT FOR THE MONTH OF _____ 19 ____

SECTION A- APPLICATIONS:

1. Pending from preceding month		_____
2. Received during month		_____
3. Total during month (Item 1 + 2)		_____
4. Disposed of during month		_____
A. Granted	_____	
B. Denied	_____	
C. Withdrawn or canceled	_____	
5. Pending at end of month		_____

SECTION B - CASES:

6. Continued from preceding month		_____
7. Applications granted during month		_____
8. Restored during month		_____
9. Transferred from another county during month		_____
10. Total active during month (Item 6 + 7 + 8 + 9)		_____
A. Warrant issued	_____	
B. Warrant not issued	_____	
11. Discontinued during month		_____
A. Transferred to Security for the Blind	_____	
B. Other	_____	
12. Continued to next month		_____

SECTION C - OBLIGATIONS INCURRED:

13. Total		$_____
A. State share	$_____	
B. County share	$_____	

(Signature of Reporting Officer) _____ (Title) _____

(Date) _____ 19 ____

Form APSB 237, (December 1948)

MAIN OFFICE
SACRAMENTO
616 K STREET
14

LOS ANGELES OFFICE
MIRROR BUILDING
145 SOUTH SPRING STREET
12

SAN FRANCISCO OFFICE
GRAYSTONE BUILDING
948 MARKET STREET
2

STATE OF CALIFORNIA

Department of Social Welfare

MYRTLE WILLIAMS
DIRECTOR

Sacramento 14
January 28, 1949

Hon. Frank M. Jordan
Secretary of State
Room 109, State Capitol
Sacramento, California

IN REPLY PLEASE REFER TO:

Dear Mr. Jordan:

Attached are three copies of the regulations issued by the State Department of Social Welfare to revise Manual of Boarding Homes for Aged and Children.

These regulations were adopted by the State Social Welfare Board on January 28, 1949, pursuant to the powers conferred upon it by the Welfare and Institutions Code under Sections 103 and 114b and are filed in accordance with provisions of Section 11380 of the Government Code.

Very sincerely yours,

Myrtle Williams

MYRTLE WILLIAMS, Director
Department of Social Welfare

468:b65
Attachments

TITLE 22 - CH 2

Certified as a Regulati (or
Regulations) of the

~~State Department of Social Welfare~~
(Name of State Agency)

Myrtle Williams
(Signature)

Director
(Title)

1/28/49
(Date)

SUBMISSION OF MONT STATISTICAL REPORT ON CHILDRE NDER FOSTER CARE (PRIVATE CHILD PLACING AGENCIES AND COUNTY WELFARE DEPARTMENTS) AND QUARTERLY REPORT ON LOCATION BY COUNTY OF CHILDREN UNDER FOSTER CARE (FORM CPA-41)

Private agencies licensed by the SDSW to place children for care (except agencies which are exclusively adoption agencies) and county welfare departments which have assumed responsibility for foster care placement shall submit to the SDSW on Form CPA 41:

(1) monthly reports on the number of children placed and the number of children for whom foster care was terminated, and

(2) quarterly reports on the location by county of the children under foster care and the number of foster homes and institutions in use.

See Form CPA 41 at the end of Chapter VIII.

Form CPA 41 (both the monthly and quarterly reports) shall be submitted in triplicate to the SDSW, Bureau of Research and Statistics, 616 K Street, Sacramento 14, not later than the 15th day of the month following the month covered by the report.

Purpose

The purpose of these reports is to provide the SDSW with data on the number and location of children in foster care under the supervision of private child placing agencies and county welfare departments and on the type of facilities in which the children are placed.

Coverage (a)

Include all children in foster care who are being supervised by the reporting agency whether or not the placement was made by the agency.

Include all children supervised by the reporting agency whether the facility is licensed, unlicensed, or not subject to license. This includes facilities under the licensing jurisdiction of the SDSW, the State Department of Mental Hygiene, or the State Department of Public Health.

Also include children 16 years of age or over under foster care supervised by the reporting agency.

Exclude the following:

1. Children in homes of

   a. Persons who have filed petitions for their adoption, or
   b. Persons with whom the relinquished child has been placed for adoption

2. Children under day care only

3. Children under supervision by the agency in their own homes or in homes of close relatives

4. Children placed by parents, guardians, relatives, or probation officers for whom the reporting agency has no responsibility for supervision

(a) Clarification

(Continued on Next Page)

Effective March 1, 1965

5. Minor services such as referral of parents to a licensed foster home.

Reporting Agencies

Monthly and quarterly statistical reports on Form CPA-41 shall be submitted by the following:

1. Private child placing agencies licensed by the SDSW (except agencies which are exclusively adoption agencies).

2. County welfare departments which supervise children under foster care.

Reporting Plan

Form CPA-41 includes: (a)

1. Monthly data on the number of children under foster care supervised by the reporting agency and the number of children for whom such foster care service was terminated, and

2. Quarterly data on the location by county of the children under foster care and the number of foster homes and institutions in use.

Submission Instructions

Three copies of Form CPA-41 (both the monthly and quarterly reports) shall be submitted by the above specified agencies so as to be received by the SDSW, Bureau of Research and Statistics, 616 K Street, Sacramento 14, not later than the 15th day of the month following the month covered by the report. Reports shall be submitted each month even though no children under foster care are supervised during the month by the reporting agency.

(a) Clarification

Effective March 7, 1949

Include in these reports only those children placed by your agency in foster family homes or institutions under the licensing jurisdiction of the SDSW, the State Department of Mental Hygiene, and the State Department of Public Health.

Exclude from these reports the following:

(1) Children in homes of adoptive parents.
a. In homes of persons who have filed independent petitions for adoption, or
b. In homes of persons with whom a relinquished child has been placed for adoption. (a)

(2) Children placed for day care only.

(3) Children under supervision by your agency in their own homes or the homes of close relatives.

(4) Children placed by parents, guardians, relatives, or probation officers.

MONTHLY STATISTICAL REPORT ON CHILDREN UNDER FOSTER CARE

Two columns are provided for reporting the type of foster care which the children placed and/or supervised by your agency are receiving. (a)

The two columns are to be mutually exclusive. No consideration will be given to totals of the two columns except for point of time figures, such as total children under foster care on the first or last day of the month. (Items 1 and 5) A child moved from a boarding home to an institution, or vice versa, is to be reported as a foster care termination (Item 4) in one column and as a placement (Item 2) in the other column in the month in which the transfer takes place. Movements of children from boarding home to boarding home, or from institution to institution, during the same or different months, are not to be reported unless they result in a change in the agency supervising the child. (a)

Column 1, Foster Family Care, includes children receiving care in a private family home which accepts for 24-hour care, with or without compensation, one to fifteen children (inclusive), under sixteen years of age. However, if the home is so organized or administered that its service is essentially institutional in character, consider it an institution regardless of the number of children for whom care is provided. (a)

Column 2, Institutional Care, includes children receiving care in a home which accepts for 24-hour care sixteen or more children under sixteen years of age or which is so organized or administered that its service is essentially institutional in character regardless of the number of children for whom care is provided. (a)

Item 1. Children under foster care on first day of month. Enter in the appropriate column the number of children receiving foster care under the supervision of the agency on the first day of the month. The entries in this item must be the same as the entries in the corresponding columns of Item 5, Children under foster care on last day of month, of the previous month's report; otherwise an explanation is necessary. (a)

(Continued on Next Page)

(a) Clarification

Effective March 1, 1949

~~Item 2. Children placed under foster care during month. Enter in the appropriate column the number of children placed under foster care by your agency during the month. A child moved from a foster family home to an institution is to be reported as placed under institutional care, and vice versa. Children placed in a foster family home during the month and subsequently moved to another foster family home during the same month are to be counted only once in this item. Children placed in a foster family home during a previous month (reported in Item 1) and moved to another foster family home in this month are not to be counted in this item. This applies also to children moved from one institution to another.~~

(a)

Item 2. Children placed under foster care during month. Enter in the appropriate column the number of children who were:

1. Placed under foster care and supervised by your agency during the month,

   or

2. Who were receiving foster care and were placed under the supervision of your agency during the month.

A child moved from foster family care to an institution, or vice versa, is to be reported in this item in the month in which the transfer takes place.

Item 3. Total children under foster care during month. Enter in each column the sum of the entries in Items 1 and 2 in that column.

Item 4. Children for whom foster care was terminated during month. Enter in the appropriate column the number of children for whom foster care was terminated during the month. A child moved from a foster family home to an institution is to be reported as a termination from foster family care, and vice versa. Children placed in a foster family home during this month or in a previous month and moved to another foster home during this month are to be excluded from this item. This applies also to children moved from one institution to another. Foster care for a child is to be considered terminated during the month in which the agency learns that the child is in the home of persons who have filed an independent petition to adopt the child or during the month in which a child relinquished to the agency is placed in the home of adoptive parents.

Item 5. Children under foster care on last day of month. Enter in each column the difference between the entries in Items 3 and 4 in that column.

QUARTERLY REPORT ON LOCATION BY COUNTY OF CHILDREN UNDER FOSTER CARE

Complete this report quarterly for children under foster care on the last day of the following months (reported in Item 5 of the report for the month) March, June, September, and December.

County of Location. Enter in this column the counties in which children placed by your agency are located on the last day of the month.

Column 1. Number of children in foster family homes. Enter opposite the county name the number of children placed by your agency in foster homes located in that county. Enter the total of the entries in this column opposite "Total" at the

(Continued on Next Page)

(a) Clarification

Effective March 1, 1949

foot of the column; this figure should be the same as the entry in Item 5, Column 1, of the monthly report.

Column 2. Foster family homes in use. Enter opposite the county name the number of foster family homes in use by your agency in that county. Enter the total of the entries in this column opposite "Total" at the foot of the column.

Column 3. Number of children in institutions. Enter opposite the county name the number of children placed by your agency in institutions located in that county. Enter the total of the entries in this column opposite "Total" at the foot of the column; this figure should be the same as the entry in Item 5, Column 2, of the monthly report.

Column 4. Number of institutions in use. Enter opposite the appropriate county the number of institutions in use by your agency in that county. Enter the total of the entries in this column opposite "Total" at the foot of the column.

Effective March 1, 1949

FILED

in the office of the Secretary of State
of the State of California

JAN 28 1949

At 5 o'clock P M.

FRANK M. JORDAN, Secretary of State

By [illegible]

Assistant Secretary of State

Certified as a Regulation r
Regulations) of the

State Department of Social Welfare
(Name of State Agency)

Myrtle Cornelius
(Signature)

Director
(Title)

1/28/49
(Date)

A. Consent

1. In every adoption where the parents' consent is necessary, either independent or stepparent, the consent must be on a form prescribed by the State Department of Social Welfare, except when an agency licensed by the State Department of Social Welfare is a party to the adoption. (Secs. 224m, 227, Civil Code)

2. The department provides separate forms for stepparent adoptions, for independent adoptions, for use of parents residing in California, and for parents residing outside California.

3. The department or county adoption agency may furnish the attorney with forms for use outside California, but the preferred procedure is for the department or county adoption agency to secure such consents. It will accept a consent of a non-resident parent on a form other than that issued by the department when the consent is properly executed and covers all essential points. (a)

B. Relinquishment

1. There is no provision in the law regarding the form of the relinquishment which must be executed by the parent surrendering a child to an agency. Forms for use by adoption agencies are therefore prescribed by the SDSW.

2. When the parent resides outside the state at the time of relinquishing the child to an adoption agency in California, the relinquishment may be signed before a notary on a form prescribed by the SDSW and previously signed by an authorized official of the agency, signifying the willingness of the agency to accept the relinquishment. (Sec. 224m of the Civil Code)

3. ~~When~~ The parent may sign a relinquish~~ing~~ment a child to a county adoption agency in California ~~signs a relinquishment~~ while in another county. ~~the~~ Such relinquishment may be signed before a representative of the State Department of Social Welfare or an adoption agency licensed by ~~it~~ the SDSW on a form previously signed by an authorized official of the agency accepting the child, signifying its willingness to accept the relinquishment. (a)

FILED
in the office of the Secretary of State
of the State of California

JAN 28 1949

At 5 o'clock P M.

FRANK M. JORDAN, Secretary of State

By Robert T. Jordan
Assistant Secretary of State

(a) Additional instructions.

Effective March 1, 1949

A. Consents

1. In every adoption where the parents' consent is necessary, either independent or stepparent, the consent must be on a form approved by the State Department of Social Welfare, except when an agency licensed by the State Department of Social Welfare is party to the adoption. (Secs. 224a, 224b, Civil Code)

2. The department provides separate forms for stepparent adoptions, for independent adoptions, for use of persons residing in California, and for persons residing outside California.

3. The department or county adoption agency may furnish the attorney with forms for use outside California, but the prescribed procedure is for the department or county adoption agency to issue such consents. It will accept a consent of a non-resident parent on a form other than that issued by the department when the consent is properly executed and covers all essential points. (a)

B. Relinquishment

1. There is no provision in the law requiring the form of the relinquishment which must be executed by the parent surrendering a child to an agency. Forms for use by adoption agencies are therefore prescribed by the SDSW.

2. When the parent resides outside the state at the time of relinquishing the child to an adoption agency in California, the relinquishment may be signed before a notary on a form prescribed by the SDSW and previously signed by an authorized official of the agency, signifying the willingness of the agency to accept the relinquishment. (Sec. 224a of the Civil Code)

3. When the parent relinquishing a child to a county adoption agency in California signs a relinquishment while in an other county, the relinquishment may be signed before a representative of the State Department of Social Welfare or an adoption agency licensed by it on a form previously signed by an authorized official of the agency accepting the child, signifying the willingness to accept the relinquishment. (a)

(a) Additional instructions.

~~On the basis of its investigation the agency will make the decision:~~

A. The agency will recommend that the adoption be granted if its findings disclose: (a)

1. ~~A.~~ That adoption is for the child's best interest and future welfare; ~~and should be recommended~~; or

2. ~~B.~~ That adoption will provide legal protection not otherwise available for the child, and for this reason should be recommended, although unfavorable recommendation might otherwise be made on basis of the facts disclosed; or (a)

3. ~~C.~~ That the favorable factors involved (taking into consideration the length of time the child has been in the home, and the probable damage to the child by removal from the home) outweight other unfavorable factors in the situation and merit recommendation of the petition; ~~or~~ (a)

B. It will recommend that the petition be denied if its findings disclose:

1. That the child is not adoptable at the time or that its adoptability cannot be determined.

2. ~~D.~~ That adoption is not for the best interest of the child, ~~and that its recommendation should be that the petition be denied.~~

~~An adequate investigation will include not only the gathering of facts in regard to the adoption, but an analysis and evaluation of the facts obtained. The value of the recommendation will depend upon the validity of the findings of the agent making the investigation. Methods for obtaining and verifying information will vary with the individual case.~~ (b)

(a) Clarification
(b) Included in new section being presented.

Effective March 1, 1949

An adequate investigation will include not only the gathering of facts in regard to the adoption, but an analysis and evaluation of the facts obtained. The value of the recommendation will depend upon the validity of the findings of the agent making the investigation. Methods for obtaining and verifying information will vary with the individual case.

A. When the recommendation is to be approval, the investigation should be complete in every respect.

B. When the recommendation is to be denial, the investigation should be complete unless the child has been removed from the home of the petitioners. The agent should verify the fact that the child is no longer in the home before filing an incomplete report recommending denial.

C. When the petition is dismissed, the case should not be considered closed until the agent has verified the fact of the child's removal or has learned what plan is to be made for him. If the child is to remain in the home, the procedure outlined in Sec. 2380-00 for referral following recommendation of denial will apply.

Certified as a Regul on (or
Regulations) of the

State Department of Social Welfare
(Name of State Agency.)

Myrtle Cressman
(Signature)

Director
(Title)

1/28/49
(Date)

MAIN OFFICE
SACRAMENTO
616 K STREET
14
LOS ANGELES OFFICE
MIRROR BUILDING
145 SOUTH SPRING STREET
12
SAN FRANCISCO OFFICE
GRAYSTONE BUILDING
948 MARKET STREET
2

STATE OF CALIFORNIA

Department of Social Welfare

MYRTLE WILLIAMS
DIRECTOR

Sacramento 14
January 28, 1949

Hon. Frank M. Jordan
Secretary of State
Room 109, State Capitol
Sacramento, California

IN REPLY PLEASE REFER TO:

Dear Mr. Jordan:

Attached are three copies of the regulations issued by the State Department of Social Welfare to revise Adoption Manual of Policies and Procedures.

These regulations were adopted by the State Social Welfare Board on January 28, 1949, pursuant to the powers conferred upon it by the Welfare and Institutions Code under Sections 103 and 114b and are filed in accordance with provisions of Section 11380 of the Government Code.

Very sincerely yours,

Myrtle Williams

MYRTLE WILLIAMS, Director
Department of Social Welfare

468:b65
Attachments

Under Sec. 120 of the W&IC, the SDSW is making available some of the CWS funds to the counties for educational leaves.

A. Purpose

The purpose of this plan is to increase the number of trained workers and supervisors in the field of children's services in order to meet to some degree the shortage of staff in the local county welfare departments and thereby strengthen the services for children in California. Further, it may be said that this plan is primarily designed to improve the services of county welfare departments and not as a direct reward for county workers.

B. County Employees Eligible

The person must have permanent status or must be a probationary employee who immediately preceding his appointment to his present position held permanent status in some other class. He must also have shown a sustained interest in social work, and exhibit potentialities as a Child Welfare Worker, Supervisor, or Director.

The employee must make his own application to an accredited graduate school of social work of his own choice, and present evidence to his county welfare director that he meets the entrance requirements.

Further, the employee must be recommended by his county welfare director for an educational leave with a statement from the director that the worker on his return will be used to strengthen the child welfare program.

C. Schools and Courses of Study

Educational leaves under this plan shall be limited to graduate schools of social work which are accredited by the American Association of Schools of Social Work.

County employees granted leaves shall select only those courses which will add to their training as Child Welfare Workers, ~~or~~ Supervisors, or Directors.

D. Length of Leaves

Educational leaves may be granted:

1. For a minimum of one school year (two semesters or three quarters) ~~to a person who has~~ for workers who have had no graduate social work. After successful completion of one year's work at the school, the leave may be extended an additional ~~two semesters or three quarters, if this is the recommendation of the CWS Committee on Educational~~ Leaves; period.

(a)

2. For the required period of time for ~~a person who has~~ workers who have had some graduate ~~school~~ social work, but ~~who needs~~ need additional training ~~in order to complete a year's graduate work.~~ to complete one full year of graduate work. After successful completion of one year's

(Continued on Next Page)

(a) Clarification

Effective March 1, 1949

work at the school, the leave may be extended an additional ~~two semesters or three quarters, if this is the recommendation of the CWS Committee on Educational Leaves;~~ period to enable completion of a second year of graduate study planned toward a master's degree.

~~3. For graduates of schools of social work who with a refresher course might contribute more to a phase of the child welfare program.~~

3. For the required period of time for workers with at least a year of graduate social work who need additional work to complete a second year of graduate study. After successful completion of the period of leave originally approved, the leave may be extended for the period required to complete the master's degree. (a)

4. For a refresher course for workers with professional training who might thereby be enabled to contribute more to a phase of the child welfare program.

E. County Employee Agreement

A written agreement ~~must~~ shall be signed by the employee and the county welfare director on a form prescribed by the SDSW which shall include the following provisions:

1. That the worker agrees to work one year (or for a period of time otherwise specified by the CWS Educational Leave Committee) immediately following the educational leave in the county welfare department ~~for~~ in the child welfare program. If, however, no such employment is available in the county granting the leave, the worker shall agree to accept employment in any of the other Merit System counties, or to reimburse in full the amount of educational stipend received. In the event that the worker terminates employment in the county before the period of leave is satisfied, the worker shall agree to reimburse the remainder of the amount of the educational stipend as represented by the time due. (a)

2. That the worker agrees to a review and evaluation of his performance at school by the CWS Educational Leave Committee, and further agrees to terminate his educational leave and return to his county of employment if so recommended by the committee.

3. That upon his return to work, the employee shall be entitled to all salary increments, vacation rights, etc., to which he normally would have been entitled had he remained on the job.

4. That the educational stipend shall be for tuition, special fees, books, living expenses while at school, and transportation to and from school; that the stipend shall be paid directly to the employee by the county; and that the stipend in no instance shall be greater than the CWS salary currently established for the county plus transportation to and from school.

5. That the educational leave shall be for a stipulated period of time at a specified school.

(Continued on Next Page)

(a) Clarification

Effective March 1, 1949

[illegible] the leave may be extended as additional [illegible] circumstances, if [illegible] recommendation of the OWE Committee [illegible]. However, [illegible] completion of a period of [illegible] by placing [illegible] a master's degree.

[illegible] programs of schools of social [illegible] will be with a preference toward [illegible] contribute more to a [illegible] public welfare program.

[illegible] for the required period of [illegible] for [illegible] there with at least a year of [illegible] work the [illegible] additional work to complete a [illegible] year of graduate study. After successful completion of the period of leave originally approved, the leave may be extended for the period required to complete the master's degree.

[illegible] for a [illegible] course for workers with professional training who might [illegible] be expected to contribute more to a phase of the public welfare program.

County Employee

[illegible] the employee and the county welfare [illegible] the following:

[illegible] work [illegible] the other-[illegible] specified [illegible] for the following the [illegible] welfare [illegible] however, [illegible] the worker shall agree [illegible] public [illegible] system [illegible]. In the [illegible] the on [illegible] the [illegible].

[illegible] That the worker [illegible] duration of his [illegible] school [illegible] the [illegible] terminate his [illegible] and [illegible] county [illegible] if so requested [illegible] the commission.

[illegible] That upon his return to work, the employee shall be entitled to all salary increments, vacation rights, etc., he [illegible] would have been entitled had he remained on the job.

[illegible] That the educational allowance shall be for tuition, special fees, books, living expenses while at school, and transportation to and from school; that the stipend shall be paid directly to the employee by the county; and that the stipend in no instance shall be greater than the OWE salary currently established for the county [illegible] transportation to and from school.

5. That the educational leave shall be for a stipulated period of time at a specified school.

(Approved as [illegible])

(1) Clarify [illegible]

F. CWS Educational Leave Committee

The director of the SDSW shall appoint ~~two~~ an educational leave committees ~~(one to function in the North, and the other to function in the South) of five members each~~, consisting of representation from the SDSW, the County Welfare Directors' Association of California, and ~~a~~ the graduate schools of social work in California.

~~Ex-officio and secretary to the committee shall be~~ A member of the Division of Personnel and Training of the SDSW shall be an ex-officio member of the committee. ~~Employees~~ and county welfare directors whose applications are before the committee for action may are urged to attend the committee meetings; ~~with voice, but without vote.~~ they may enter into the discussion, but they may not vote. (a)

This committee shall perform the following functions:

1. Recommend amounts of educational stipends based upon tuitions, special fees, books, transportation to and from schools, and living costs at the schools, within the limits of the available CWS funds, and the policy set forth in foregoing paragraph E-4.

2. Select from among the applications received those counties and those employees who will benefit under this plan and establish a priority rating for each application.

3. Suggest improvements in the CWS Educational Leave plan.

G. Procedure

Applications for educational leave will be treated as follows:

1. The county welfare director shall initiate a CWS plan (i.e., narrative and contract) to provide CWS funds for an educational leave.

2. The county welfare director shall prepare a statement (this may be done before the County-State CWS agreement is made final) to the SDSW, attention of the CWS Educational Leave Committee, which shall include:

   (a) The recommendation referred to under the heading "County Employees Eligible", paragraph B;

   (b) The graduate school of social work and the period of time for which the leave is recommended, and evidence that the county employee meets the entrance requirements of the school of social work.

3. The ~~secretary to the CWS Education Leave Committee~~ SDSW shall make a preliminary review of the material submitted by the county welfare director and request more data of the field representative or the county welfare director if such is necessary for the committee to take action. (a)

4. The secretary to the CWS Educational Leave Committee shall bring to the attention of the CWS Educational Leave Committee those applications ready to be acted upon.

(Continued on Next Page)

(a) Clarification

Effective March 1, 1949

[illegible]

[illegible] Leave Committee

[illegible] the SDSW shall support [illegible] educational [illegible] and [illegible] of representation from [illegible] of California, and [illegible]

[illegible] of [illegible] committee consists of a small [illegible] employees and employees and [illegible] an ex-officio member [illegible] the committee for action [illegible] attend the committee meetings with voice, but without [illegible] enter into the discussion, but may not vote.

This committee shall perform the following functions:

1. Recommend amounts of educational stipends based upon tuitions, special fees, books, transportation [illegible] and free schools, and living costs at the schools, within the limits of the available CWS funds, and the policy set forth in foregoing paragraph [illegible].

2. Select from among the applications received those counties and those employees who will benefit under this plan and establish a priority rating for each application.

3. Report improvements in the CWS educational leave plan.

4. [illegible]

Applications for educational leave will be treated as follows:

1. The county welfare director shall initiate a CWS plan (i.e., permanent and temporary) to provide CWS staff for an educational leave.

2. The county welfare director shall prepare a statement (this may be done before the County-State CWS agreement is made final) to the SDSW, attention of the CWS Educational Leave Committee, which shall include:

(a) The recommendation referred to under the heading "County Employees Eligible", paragraph 2;

(b) The graduate school of social work and the period of time for which the leave is recommended, and evidence that the county employee meets the entrance requirements of the school of social work.

3. The secretary to the CWS Education Leave Committee SDSW shall make a preliminary review of the material submitted by the county welfare director and request more data of the field representative or the county welfare director if such is necessary for the committee to take action.

4. The secretary to the CWS Educational Leave Committee shall bring to the attention of the CWS Educational Leave [illegible] ready to be acted upon.

(a)

[illegible]

5. The committee shall:

   (a) Approve or disapprove an application;

   (b) Establish a priority rating for each application approved; and

   (c) Recommend an educational stipend to be granted the applicant.

6. The ~~secretary~~ SDSW shall advise the county of the action taken by the CWS Educational Leave Committee. (a)

7. The county welfare director shall submit to the Department of Social Welfare, Attention: Secretary to the CWS Educational Leave Committee, a signed agreement (see agreement at end of this section).

8. The secretary shall maintain contacts with the schools and bring to the committee's attention matters requiring action. (W&IC 120)

(Continued on Next Page)

(a) Clarification

Effective March 1, 1949

COUNTY EMPLOYEE AGREEMENT
RELATING TO EDUCATIONAL LEAVE WITH STIPEND
UNDER THE CHILD WELFARE SERVICES PLAN

It is hereby agreed, this_____day of_____, 194__, between the County of_____and _____, an employee of the Welfare Department of_____County that the following provision shall be met in respect to the educational leave:

1. That the educational leave shall be for attendance at _____ and shall begin_____and end_____.

2. That the educational stipend shall be $_____per month, paid to the employee, and shall be for tuition, special fees, books, living expenses while at school, and transportation to and from school.

3. That upon his return, the employee shall be entitled to all salary increments, vacation rights, etc., to which he normally would have been entitled had he remained on the job.

4. That the employee shall work _____months in the county welfare department in the child welfare program immediately following this educational leave. If, however, no such employment is available in the county, the employee shall accept employment in any of the other Merit System counties or shall reimburse in full the amount of educational stipend received. In the event the employee terminates employment in the county before the period of leave is satisfied, he shall reimburse the remainder of the amount of the educational leave stipend as represented by the time due. (a)

5. That the employee shall submit to a review and evaluation of his performance at school by the CWS Educational Leave Committee, and further shall terminate his leave and return to the county if so recommended by the committee.

_____Dated _____
Employee, County of_____

Approved by the Board of Supervisors of_____County this _____ day of_____, 194___.

_____
Clerk of the Board of Supervisors of County of _____

(a) Clarification

Effective March 1, 1949

FILED

in the office of the Secretary of State
of the State of California

JAN 28 1949

At 5 o'clock P M.

FRANK M. JORDAN, Secretary of State

By Robert H. Jordan
Assistant Secretary of State

Myrtle Williams
Director

TITLE 22 - CH. 2

STATE OF CALIFORNIA
DEPARTMENT OF SOCIAL WELFARE
616 K STREET
SACRAMENTO 14

February 2, 1949

DEPARTMENT BULLETIN NO. 352 (Fiscal)

TO: COUNTY WELFARE DEPARTMENTS
COUNTY AUDITORS
COUNTY BOARDS OF SUPERVISORS

Subject: Method of Reporting Old Age Security and Security for the Blind Payments for January 1949 and Subsequent Months

Your attention is called to the fact that in the preparation of the Old Age Security and Security for the Blind claims for January 1949 and subsequent months, extreme care must be exercised in segregating disbursements and receipts made under Article XXV of the Constitution from disbursements and receipts made under applicable sections of the Welfare and Institutions Code for periods prior to 1/1/49. SDSW Bulletin Number 336 (Fiscal) dated December 13, 1948, sets forth the required procedure for preparing Aged and Blind Security claims for months subsequent to 12/31/48. The most important points are:

1. It may be necessary to file two separate Aged and/or Blind Security claims (payrolls, schedules, and affidavits) for January 1949 and subsequent months.

   (a) One claim to report receipts and disbursements for periods subsequent to 12/31/48. (Use Affidavit, Form Ag/Bl 800 and Payroll, Form AB 801, revised 1/1/49.)

   (b) Another claim to report receipts and disbursements for periods prior to 1/1/49. (Use affidavit, recapitulation sheets, and payroll forms in use during period covered by the report.) This claim must be approved by the Chairman of the County Board of Supervisors.

2. Claims for APSB receipts and disbursements for periods subsequent to 12/31/48 shall be filed on the new APSB Affidavit, Form APSB 800, and Payroll, Form APSB 801. This claim requires approval by the Chairman, County Board of Supervisors.

3. Warrants for December 1948 and prior months which are cancelled in January 1949 or subsequent months shall not be reported on the Schedule, Form ABC 804, attached to the claim for the current month, nor shall the respective state and federal shares be included on the affidavit for the current month. Such cancelled warrants shall be listed on a separate Schedule, Form ABC 804, and the respective state and federal shares shall be reported on a second affidavit properly certified by the County Welfare Director, County Auditor, and approved by the Chairman, Board of Supervisors. This affidavit will in effect be a debit voucher claim to be applied against monies advanced to the county prior to 1/1/49.

Myrtle Williams
Director

TITLE 22 - CH. 2

STATE OF CALIFORNIA
DEPARTMENT OF SOCIAL WELFARE
616 K STREET
SACRAMENTO 14

February 2, 1949

DEPARTMENT BULLETIN NO. 352 (Fiscal)

TO: COUNTY WELFARE DEPARTMENTS
COUNTY AUDITORS
COUNTY BOARDS OF SUPERVISORS

Subject: Method of Reporting Old Age Security and Security for the Blind Payments for January 1949 and Subsequent Months

Your attention is called to the fact that in the preparation of the Old Age Security and Security for the Blind claims for January 1949 and subsequent months, extreme care must be exercised in segregating disbursements and receipts made under Article XXV of the Constitution from disbursements and receipts made under applicable sections of the Welfare and Institutions Code for periods prior to 1/1/49. SDSW Bulletin Number 336 (Fiscal) dated December 13, 1948, sets forth the required procedure for preparing Aged and Blind Security claims for months subsequent to 12/31/48. The most important points are:

1. It may be necessary to file two separate Aged and/or Blind Security claims (payrolls, schedules, and affidavits) for January 1949 and subsequent months.

   (a) One claim to report receipts and disbursements for periods subsequent to 12/31/48. (Use Affidavit, Form Ag/Bl 800 and Payroll, Form AB 801, revised 1/1/49.)

   (b) Another claim to report receipts and disbursements for periods prior to 1/1/49. (Use affidavit, recapitulation sheets, and payroll forms in use during period covered by the report.) This claim must be approved by the Chairman of the County Board of Supervisors.

2. Claims for APSB receipts and disbursements for periods subsequent to 12/31/48 shall be filed on the new APSB Affidavit, Form APSB 800, and Payroll, Form APSB 801. This claim requires approval by the Chairman, County Board of Supervisors.

3. Warrants for December 1948 and prior months which are cancelled in January 1949 or subsequent months shall not be reported on the Schedule, Form ABC 804, attached to the claim for the current month, nor shall the respective state and federal shares be included on the affidavit for the current month. Such cancelled warrants shall be listed on a separate Schedule, Form ABC 804, and the respective state and federal shares shall be reported on a second affidavit properly certified by the County Welfare Director, County Auditor, and approved by the Chairman, Board of Supervisors. This affidavit will in effect be a debit voucher claim to be applied against monies advanced to the county prior to 1/1/49.

STATE OF CALIFORNIA

DEPARTMENT OF SOCIAL WELFARE

[illegible]

SACRAMENTO 14

FEBRUARY 2, 1949

DIRECTOR'S BULLETIN No. 323 (Final)

To: COUNTY DEPARTMENTS
COUNTY AUDITORS
COUNTY HEADS [illegible]

Subject: [illegible] Reporting Old Age Security and Security for the Blind Payments for January and Subsequent Months

Your attention is called to the fact that in the preparation of the Old Age Security and Security for the Blind claims for January 1949 and subsequent months, errors must be corrected in accordance with directions and reporting made under Article XII of the Constitution from disbursements and not from basic grant eligibility months of the Welfare and Institutions Code for Aid to Aged and Blind Bulletin Number 319 (Final) dated December 15, 1948, and the revised procedures for preparing Aged and Blind Security claims for months prior to 12/1/48. The most important points are:

1. It may be necessary to file two separate Aged and/or Blind Security claims (payrolls, schedules, and affidavits) for January 1949 and subsequent months.

(a) One claim to report receipts and disbursements for months subsequent to 12/1/48. (Use affidavit, form AA-1 and payroll, form AA-201, revised 12/1/48.)

(b) Another claim to report receipts and disbursements for periods prior to 12/1/48. (Use affidavit, nonrecipients checks, and payroll forms in use during period covered by the report.) This claim must be approved by the Chairman of the County Board of Supervisors.

2. Claims for AFDC receipts and disbursements for periods subsequent to 12/1/48 shall be filed on the new AFDC Affidavit, form AFDC 301, and payroll, form AFDC 301. This claim requires approval by the Chairman, County Board of Supervisors.

3. Warrants for December Aged and Blind payments which are cancelled in January 1949 or subsequent months shall not be reported on the January, Aged AA 301, attached to the claim for the current month, nor shall the Aged AA-1 claim and payroll show be deducted on the affidavit for the current month. This required warrants shall be listed on separate schedules, form AAC 301, and the respective Aged and Blind claims shall be reported in a manner different from that provided by the County Auditor, County Controller, and approved by the Chairman, Board of Supervisors. This procedure will be explained under separate cover.

Applied equally to warrants issued to the county under Art. - 12/1/48.

4. Repayments of aid applicable to periods prior to 1/1/49 which are made in January 1949 or subsequent months shall not be reported on the Schedule, Form ABC 803, attached to the claim for the current month nor shall the respective state and federal shares be included on the affidavit for the current month. Such repayments shall be listed on a separate Schedule, Form ABC 803, and the respective state and federal shares shall be reported on a second affidavit properly certified by the County Welfare Director, the County Auditor, and approved by the Chairman, Board of Supervisors. This affidavit will likewise be a debit voucher claim to be applied against monies advanced to the county prior to 1/1/49. If a county has both cancelled warrants and/or repayments, as well as supplemental payments, being reported for periods prior to 1/1/49, they should all be combined on one affidavit.

Since Bulletin Number 336 was issued, the Payroll, Form AB 301, has been revised to eliminate Columns 5 and 6 and to provide for designating non-federal aged 63-64 year cases by (*) and all other non-federal cases by (**) in Column 3. Some counties have inquired whether or not a separate listing of non-federal aged 63-64 year cases could not be submitted in lieu of using the above designation. Either method is acceptable to this department. That is, either (1) all cases shall be listed in state case number order with non-federal cases designated by (*) or (**); or (2) two separate listings shall be prepared in state case number order, the first listing shall exclude the non-federal aged 63-64 year cases, but include all other non-federal cases designated by (**) while the second listing will include only the 63-64 year cases and shall be clearly identified on the payroll as such.

In connection with the budget changes which must be made not later than 4/30/49, retroactive to 1/1/49 some counties have inquired whether one warrant could be issued to a recipient of security covering all the months for which retroactive security must be paid. This department recommends such a procedure, but cautions that the provisions of Manual Section 626-50, Paragraphs 2 and 3, shall be followed in preparing the supplemental payrolls.

Very sincerely yours,

Myrtle Williams

MYRTLE WILLIAMS, Director
Department of Social Welfare

MAIN OFFICE
SACRAMENTO
616 K STREET
14

LOS ANGELES OFFICE
MIRROR BUILDING
145 SOUTH SPRING STREET
12

SAN FRANCISCO OFFICE
GRAYSTONE BUILDING
948 MARKET STREET
2

STATE OF CALIFORNIA

Department of Social Welfare

MYRTLE WILLIAMS
DIRECTOR

Sacramento 14
January 28, 1949

Hon. Frank M. Jordan
Secretary of State
Room 109, State Capitol
Sacramento, California

IN REPLY PLEASE REFER TO:

Dear Mr. Jordan:

Attached are three copies of the following regulations issued by the State Department of Social Welfare:

REVISIONS TO MANUAL OF POLICIES AND PROCEDURES

These regulations were adopted by the State Social Welfare Board on January 28, 1949, pursuant to the powers conferred upon it by the Welfare and Institutions Code under Sections 103 and 114b, and are filed in accordance with provisions of Section 11380 of the Government Code.

Very sincerely yours,

Myrtle Williams

MYRTLE WILLIAMS, Director
Department of Social Welfare

468:b65
Attachments

TITLE 22-CH2

MAIN OFFICE
SACRAMENTO
616 K STREET
14

LOS ANGELES OFFICE
MIRROR BUILDING
145 SOUTH SPRING STREET
12

SAN FRANCISCO OFFICE
GRAYSTONE BUILDING
948 MARKET STREET
2

STATE OF CALIFORNIA

Department of Social Welfare

MYRTLE WILLIAMS
DIRECTOR

Sacramento 14
February 4, 1949

FILED
in the office of the Secretary of State
of the State of California

FEB 4- 1949
At 3:30 o'clock P. M.
FRANK M. JORDAN, Secretary of State
By Robert V. Jordan
Assistant Secretary of State

IN REPLY PLEASE REFER
TO:

Hon. Frank M. Jordan
Secretary of State
Room 109, State Capitol
Sacramento, California

My dear Mr. Jordan:

Attached are three copies of the regulations issued by the State Department of Social Welfare on February 4. 1949.

DEPARTMENT BULLETIN NO. 355

These regulations were issued by the State Department of Social Welfare pursuant to the powers conferred upon it by the Welfare and Institutions Code under Section 114b and are being filed in accordance with Section 11380 of the Government Code.

These regulations are to be effective immediately upon filing with the Secretary of State, since this has been found necessary for the immediate preservation of the public peace, health and safety or general welfare and that notice and public procedure thereon are impracticable, unnecessary or contrary to the public interest.

Very sincerely yours,

Myrtle Williams

MYRTLE WILLIAMS, Director
Department of Social Welfare

468:b5
Attachments

TITLE 22 - CH 2

Certified as a Regulation (or Regulations of the

Dept of Soc. Welfare

(Name of State Agency)

Myrtle Williams

(Signature)

Director

(Title)

2/4/49

(Date)

W4 IC 3420, 3472

MYRTLE WILLIAMS
Director

STATE OF CALIFORNIA
DEPARTMENT OF SOCIAL WELFARE
616 K STREET
SACRAMENTO 14

February 4, 1949

FILED
in the office of the Secretary of State
of the State of California

FEB 4- 1949
At 3:30 o'clock P. M.
FRANK M. JORDAN, Secretary of State
By Robert V. Jordan
Assistant Secretary of State

DEPARTMENT BULLETIN NO. 355 (APSB)

TO: COUNTY BOARDS OF SUPERVISORS
COUNTY WELFARE DEPARTMENTS
COUNTY AUDITORS

Subject: Increase in the Amount of Aid to Partially Self-supporting Blind Residents

Sections 3420 and 3472 of the Aid to Partially Self-supporting Blind Residents law, Welfare and Institutions Code, have been amended by Chapter 10, Statutes of 1949. These amendments were declared to be urgency measures and therefore go into effect February 1, 1949.

Under these amendments the maximum grant of Aid to Partially Self-supporting Blind Residents is increased from $75 to $85 a month beginning February 1, 1949. The grants of current recipients shall be adjusted effective February 1, 1949, to bring the grant of aid into accord with the provisions of the following amended sections:

Section 3420 --

"There is hereby appropriated out of any money in the State Treasury not otherwise appropriated to every county in the State, maintaining, supporting, or caring for, as hereinafter provided in this chapter, any blind person, resident of such county, aid not in excess of eight hundred fifty dollars ($850) per annum for each such blind person so maintained, supported and cared for, or aid not in excess of one thousand twenty dollars ($1,020) per annum in the event such blind person has no county residence as provided in this chapter."

Section 3472 --

"If the county board of supervisors is satisfied that the applicant is entitled to aid under the provisions of this chapter, it shall, without delay, issue an order therefor. The amount of aid to which any applicant shall be entitled shall be, when added to the net income of the applicant from all other sources, eighty-five dollars ($85) per month.

"Net income from any of the following sources of a combined total value not exceeding eight hundred dollars ($800) per annum shall not be

considered for any purpose:

(a) Income from applicant's labor or services;
(b) The value of foodstuffs produced by the applicant or his family for his use or that of his family;
(c) The value of firewood and/or water produced on the premises of the applicant or given to him by another for the applicant's use;
(d) The value of gifts;
(e) The value of the use and occupancy of premises owned and occupied by the applicant;
(f) The net income from real and personal property owned by the applicant.

"Income in addition to the above specified shall be computed on the basis of net income."

All Aid to Partially Self-supporting Blind Residents recipients will receive a $10 increase in the amount of the monthly grant effective February 1, 1949, unless an adjustment in the grant is required because of income in excess of $800 a year. Supplemental warrants shall be issued as soon as administratively possible so that all eligible recipients will receive $85 a month effective February 1, 1949.

When income is such that a redetermination is indicated, a recheck of the income should be made immediately in order that the adjustment in the grant will be correct. Any such cases will require a review of the individual case record.

Reports of increases of $10 may be submitted to the State Department of Social Welfare by use of the Notice of Change (Form APSB 232) for the individual case or in list form, except that those cases which are involved in an adjustment because of income in excess of $800 in the yearly period shall not be reported by list. Notice of Change (Form APSB 232) is required for any cases falling within this latter group. If a list is used it shall be in accord with the attached form (Temp 157) and the cases shall be listed in numerical order according to State number. Two copies of the list shall be submitted showing action of the Board of Supervisors.

When lists are used to report increases in aid, proper notation must be made in the county case record for the individual case showing the increase in amount of aid effective February 1, 1949. Use of a rubber stamp is suggested in order to record the following information in the case record:

"Aid to Partially Self-supporting Blind Residents increased effective February 1, 1949, to $85 in accord with amended Section 3472 of the Welfare and Institutions Code per action of Board of Supervisors on _____."
Date

Notification of Action by the Board of Supervisors (Form APSB 239) need not be forwarded to APSB recipients who have not exceeded a yearly income of $800, and whose grants will be increased to the new maximum ($85) effective February 1, 1949. (Those whose increases may be reported by submission of a list).

Notification of Action by the Board of Supervisors - Form APSB 239 - (copy attached) shall be sent to recipients when an adjustment is required because of income in excess of $800 in the yearly period.

There has been no change in the ratio of state and county participation. The state share remains 5/6 and the county share 1/6 for aid paid to persons having one year or more county residence (six months for persons who became blind while residents of California). The state will continue to pay the entire amount for all cases not having county residence.

The Manual of Policies and Procedures, Sections 601-00 through 601-99, Estimates, Advances and Expenditures, remain in effect.

The Manual of Policies and Procedures, Sections 626-00 through 628-20, County Aid Claims, remain in effect except that APSB shall be reported on Forms APSB 800 and 801 as specified in Department Bulletin No. 336. All references to the maximum APSB grant shall be read as $85 rather than $75.

Very sincerely yours,

Myrtle Williams

MYRTLE WILLIAMS, Director
Department of Social Welfare

Attachments

State of California Department of Social Welfare

Forward two copies to
State Department of Social Welfare
Sacramento, California

Date_____

AID TO PARTIALLY SELF-SUPPORTING BLIND RESIDENTS
AUTOMATIC INCREASE LIST
EFFECTIVE FEBURARY 1, 1949

FROM_____COUNTY

The following recipients of Aid to Partially Self-supporting Blind Residents are entitled to an automatic increase in aid of Ten Dollars ($10) a month each, thus increasing the grant from Seventy-five Dollars ($75) to Eighty-five Dollars ($85) a month. These increases are made to conform to the provisions of Sections 3420 and 3472 of the Welfare and Institutions Code, effective February 1, 1949.

This list includes cases in which the only adjustment is the automatic increase as required by law.

PAGES_____TO _____APPROVED BY THE BOARD OF SUPERVISORS

OF THE COUNTY OF_____ ON _____.
Date

_____
Signature of County Clerk or Deputy

STATE CASE NUMBER	NAME	OLD RATE	NEW RATE

(Note: List cases in numerical order according to State Case Number. This form to be used for first page only. Blank sheets may be used for additional pages.)

Form Temp 157. February 1949

State of California Department of Social Welfare

Notification of Action by the Board of Supervisors
AID TO PARTIALLY SELF-SUPPORTING BLIND RESIDENTS

_____ COUNTY

To: [ ]

State Number _____
County Number _____
Date _____
District _____

The County Board of Supervisors, in accordance with the state law and the Rules and Regulations of the State Board of Social Welfare, acted upon your application for Aid to Partially Self-Supporting Blind Residents as stated below:

Application granted effective _____ in the amount of $ _____

Source and amount of income which was deducted _____

_____

Application denied
Reason for action _____

_____

_____

_____

The County Board of Supervisors adjusted your grant of Aid to Partially Self-Supporting Blind Residents as stated below:

Aid was DECREASED/INCREASED effective _____ to $ _____
(Cross out one)

Source and amount of income which was deducted _____

_____

Aid was discontinued effective _____

Reason for action _____

_____

_____

The grant of aid, or any change in the amount of aid, is based on your present circumstances, and is in accord with the existing law. The amount of aid granted is subject to revision with a change in your circumstances.

If you do not understand this notice, or are dissatisfied with the action of the Board of Supervisors, contact the County Welfare Department located at _____ _____ for discussion of any question involved.

COUNTY WELFARE DEPARTMENT

By _____

An applicant or recipient who is dissatisfied with the action taken upon his application, or with respect to the amount of aid granted may request a hearing before the Board of Supervisors, but such request must be filed with the County Board of Supervisors within 30 days from the date of this notice. (Welfare and Institutions Code, Section 3473.2.)

OR

The applicant or recipient who is dissatisfied with the action taken on his application, or with respect to the amount of aid granted may appeal directly to the State Department of Social Welfare, 616 K Street, Sacramento, but if a hearing before the Board of Supervisors has been requested, an appeal may not be filed with the State Department of Social Welfare until after the decision of the Board of Supervisors has been rendered. (Welfare and Institutions Code, Section 3474.5.)

"Whenever any appeal to, or hearing before, the board is otherwise authorized by law, the appeal shall be made, or the hearing applied for, within one year after the order or other action complained of. The board may rehear any matter within six months after its original order or decision, on its own motion or on application of any interested party." (Welfare and Institutions Code, Section 104.5.)

Form APSB 239, February 1949

TITLE 22 - CH 2

MAIN OFFICE
SACRAMENTO
616 K STREET
14

LOS ANGELES OFFICE
MIRROR BUILDING
145 SOUTH SPRING STREET
12

SAN FRANCISCO OFFICE
GRAYSTONE BUILDING
948 MARKET STREET
2

STATE OF CALIFORNIA

Department of Social Welfare

MYRTLE WILLIAMS
DIRECTOR

Sacramento 14
February 2, 1949

Hon. Frank M. Jordan
Secretary of State
Room 109, State Capitol
Sacramento, California

FILED
in the office of the Secretary of State
of the State of California

FEB 4 - 1949

At 3:30 o'clock P. M.

FRANK M. JORDAN, Secretary of State

By Robert E. Jordan
Assistant Secretary of State

IN REPLY PLEASE REFER TO:

My dear Mr. Jordan:

Attached are three copies of Department Bulletin No. 349 which is being filed in accordance with Section 11380 of the Government Code.

These regulations were issued by the Director of the State Department of Social Welfare with respect to OAS and Security for the Blind under the authority of Section 4 of Article XXV of the California Constitution on January 20, 1949.

These regulations were ratified by the State Social Welfare Board in so far as they pertain to APSB and ANC pursuant to the powers conferred upon it by the Welfare and Institutions Code, Sections 103.5 and 114, on January 27, 1949.

These regulations are to be effective immediately upon filing with the Secretary of State, since this has been found necessary for the immediate preservation of the public peace, health and safety or general welfare and that notice and public procedure thereon are impracticable, unnecessary or contrary to the public interest.

Very sincerely yours,

Myrtle Williams

MYRTLE WILLIAMS, Director
Department of Social Welfare

468:b5
Attachments

TITLE 22 - CH 3

Certified as a Regulation (or Regulations of the

Dept. of Social Welfare

(Name of State Agency)

Myrtle Williams

(Signature)

Director

(Title)

2/2/49

(Date)

Myrtle Williams
Director

W&IC 103.5, 114.
Cal. Const Art. XXV
Sec 4

STATE OF CALIFORNIA
DEPARTMENT OF SOCIAL WELFARE
616 K STREET
SACRAMENTO 14
January 20, 1949

FILED
in the office of the Secretary of State
of the State of California

FEB 4 - 1949
At 3:30 o'clock P. M.
FRANK M. JORDAN, Secretary of State
By Robert V. Jordan
Assistant Secretary of State

DEPARTMENT BULLETIN NO. 349 (3 Aids)

TO: COUNTY BOARDS OF SUPERVISORS
COUNTY WELFARE DEPARTMENTS
COUNTY AUDITORS

Subject: Manual Section 123-05 - Absence from the State

Notice is hereby given that the following ruling contained in Manual Section 123-05 is suspended:

"If a recipient of OAS, ANB, APSB, or a child receiving ANC leaves the state for a temporary period without loss of California residence, aid shall be continued for not more than one year following the date of departure unless unusual circumstances exist, in which case aid may be continued for a longer period.

"Recipients who were absent from the state on February 1, 1948, when this rule became effective shall be required to return to California by February 1, 1949, in order to remain eligible for assistance unless unusual circumstances exist. (W&IC 1560, 2140, 3075, 3460)"

Therefore, payment is to be continued to such persons who are otherwise eligible until such time as further instructions are issued.

Very sincerely yours,

Myrtle Williams

MYRTLE WILLIAMS, Director
Department of Social Welfare

TITLE 22 - CH 2

MAIN OFFICE
SACRAMENTO
616 K STREET
14

LOS ANGELES OFFICE
MIRROR BUILDING
145 SOUTH SPRING STREET
12

SAN FRANCISCO OFFICE
GRAYSTONE BUILDING
948 MARKET STREET
2

STATE OF CALIFORNIA

Department of Social Welfare

MYRTLE WILLIAMS
DIRECTOR

Sacramento 14
February 2, 1949

Hon. Frank M. Jordan
Secretary of State
Room 109, State Capitol
Sacramento, California

FILED
in the office of the Secretary of State
of the State of California

FEB 4 - 1949

At 11.45 o'clock a. M.

FRANK M. JORDAN, Secretary of State

By Robert T. Jordan
Assistant Secretary of State

IN REPLY PLEASE REFER TO:

My dear Mr. Jordan:

Attached are three copies of the following regulations which are being filed in accordance with Section 11380 of the Government Code:

DEPARTMENT BULLETIN 334-A dated January 26, 1949
DEPARTMENT BULLETIN 335-A dated January 26, 1949
DEPARTMENT BULLETIN 350 dated January 20, 1949
DEPARTMENT BULLETIN 351 dated January 26, 1949

These regulations were issued on the above date(s) by the Director of the State Department of Social Welfare under authority of Section 4 of Article XXV of the California Constitution.

These regulations are to be effective immediately upon filing with the Secretary of State, since this has been found necessary for the immediate preservation of the public peace, health and safety or general welfare and that notice and public procedure thereon are impracticable, unnecessary or contrary to the public interest.

Very sincerely yours,

Myrtle Williams

MYRTLE WILLIAMS, Director
Department of Social Welfare

468:35
Attachments

RECEIVED
SACRAMENTO, CALIF.
1949 FEB 4 AM 11 02
FRANK M. JORDAN
SECRETARY OF STATE
STATE OF CALIFORNIA

Certified as a Regulat (or as Regulations) of the

Dept of Social Welfare
(Name of State Agency)

Mylle Williams
(Signature)

Director
(Title)

2-2-49
(Date)

Cal. Const. Art. XXV
Sec 2 + 4

Myrtle Williams
Director

STATE OF CALIFORNIA
DEPARTMENT OF SOCIAL WELFARE
616 K STREET
SACRAMENTO 14

January 20, 1949

FILED
in the office of the Secretary of State
of the State of California

FEB 4- 1949

At 11:45 o'clock A. M.
FRANK M. JORDAN, Secretary of State
By Robert E. Jordan
Assistant Secretary of State

DEPARTMENT BULLETIN NO. 350 (SB)

TO: COUNTY BOARDS OF SUPERVISORS
COUNTY WELFARE DEPARTMENTS
COUNTY AUDITORS

Subject: Security for the Blind - Budget Method for Determining Total Need

The State Department of Social Welfare hereby establishes a budget method for determining need of applicants for and recipients of Security for the Blind. The Department hopes thereby to provide allowances which will more nearly meet the present high cost of the necessities of life when the individual possesses income or resources which can be used to help meet his total need.

The total need of each recipient of Security for the Blind who possesses income or resources (other than casual income and inconsequential resources) shall be computed by means of the budget method unless the recipient expresses a preference for excess need or the flat grant basis. (See Manual Sections 156-15 and 156-25.)

Adjustments in the amount of Security for the Blind shall be made as soon as administratively possible, and in no case later than April 30, 1949, in accord with the provisions as required by the budget method for those recipients with income or resources and who do not desire to have their needs computed on the basis of excess need. Such adjustments shall be retroactive to January 1, 1949.

Each applicant for Security for the Blind, if it is determined that he is eligible therefor, shall have his total need determined by the budget method if he possesses income or resources (other than casual income and inconsequential resources), unless he indicates a desire to have his need established on the basis of excess need.

It is a fundamental policy of the State Department of Social Welfare to give every blind applicant or recipient the maximum amount of security to which he is entitled under the laws of this State. Therefore, every applicant and recipient of Security for the Blind who possesses income or resources (other than casual income and inconsequential resources) shall be advised of his right to have his need determined by means of the budget method and of any advantages accruing to him therefrom. A letter shall be sent to each such recipient as soon as possible advising him of the budget method and all applicants shall be so informed.

When a budget of the individual's requirements shows that his need is in excess of $85 a month, the grant is determined by subtracting the income (other than casual income and inconsequential resources) from the total need as established by the bud-

get, except that in no event may the grant exceed $85 (see Section 150-50, Types of Casual Income). When the difference is in partial dollars, security shall be granted in that amount which represents the next highest whole dollar. The amount of security plus the income (other than casual income and inconsequential resources) shall not exceed the total need except to the extent that the grant is adjusted to the next highest whole dollar.

Example: Total need as determined by the recipient's budget is $99.70. He has OASI income of $14.87 per month. The difference is $84.83. Security is granted in the amount of $85, the next highest whole dollar.

I. BUDGET SCHEDULE

The following Budget Schedule is effective as of January 1, 1949, for use in determining the amount of total need of applicants for and recipients of Security for the Blind:

Food	$40.65
If all meals are purchased in restaurants	71.15
Housing, as paid	
Transportation	6.00
Clothing	8.80
Household operations	4.50
Utilities, as paid or the following minima	
Electricity	1.20
Gas	1.85
Water	1.40
Garbage removal	.50
Other, for example, heat	3.15
Incidentals	10.00
Special needs (in the amount of actual cost) such as medical and/or dental care, telephone service, etc.	
Regular expenses incident to blindness	20.00

When the facts in the individual case establish that the need of the recipient requires a larger amount than that shown in the Budget Schedule, the increased amount so determined shall be included in the budget. (See "Explanation of Items of Need in Budget Schedule" in this Bulletin.)

Only those items which represent the need of the individual recipient shall be included in his budget. For example, if the recipient has no expense for garbage removal, this item would be omitted from his budget. Required payments on a debt represent a need when the debt is secured by the recipient's home or is secured by his furniture or some other item of personal property which is a current necessity.

The Budget Schedule does not include a specific figure for special items of need. Special items of need on the part of the individual would be included under "Special Needs" in his budget. See Item V-Special Needs-Definition and Determination thereof" for discussion of special items of need and how they are established.

II. EXPLANATION OF ITEMS OF NEED IN BUDGET SCHEDULE:

1. Food

The smaller amount shown in the Budget Schedule represents the food allowance when the recipient has his meals at home, either alone or with a household group. The larger amount represents the food allowance when all meals are purchased in restaurants. If a physician has recommended a special diet and the cost is determined to be in excess of the amount allowed for food in the Budget Schedule, the excess is considered a "Special Need." (See Item V -"Special Needs - Definition and Determination thereof.")

When a recipient pays a stipulated amount for board, or pays for board and room, the amount of this item of need is the amount as paid.

2. Housing

A specific amount for the housing item is not set. Allowance is made on the basis of the recipient's living arrangement.

(a) If the recipient pays rent, his housing need is the amount paid for rent. If two or more persons share the same quarters, the recipient's prorated share is his housing need.

(b) If the recipient receives free rent, the estimated value of such free housing represents the amount of housing need. While due regard may be given to the actual value of such housing, the evaluation shall take into consideration the worth of the housing to one who has only limited funds available for his needs.

(c) If the recipient lives in a home which he owns or in which he has an interest, the item of "Housing" is the sum of the costs of ownership and the net value of occupancy, if any, as determined under Section 152-10, Occupancy Value of Homes Owned by Recipients. In addition to the expenses of ownership which include taxes, insurance, assessments, and required encumbrance payments, an allowance of $2 a month shall be made to cover the average cost of minor repair and upkeep. (The expense of occasional repair which is not met through the normal upkeep allowance and which is necessary to provide safe, healthful housing or to minimize deterioration, should be included as a separate special item of need.) (See Item V - "Special Needs - Definition and Determination thereof.")

When the recipient has an interest in the home with other persons, the value of occupancy plus his prorated share of the expenses of ownership represents his housing need, i.e., if the home is owned jointly with the wife, one-half of the expenses of ownership plus occupancy value, if any, is the housing need; if owned jointly by three persons, the recipient's housing need is one-third of the expenses of ownership plus the occupancy value, if any.

3. Transportation

This is for ordinary transporation needs. There may be occasions in which the actual need of the recipient requires a greater amount, and when this is established the amount required is allowed.

There may be recipients who, because of their physical condition, have little use for transporation as such, but in lieu thereof require messenger service. In the rare case in which there is no need for transportation or for services in lieu thereof this item is omitted.

4. Clothing

This covers the minimum need for purchase of new clothing and for the ordinary clothing renovation. The clothing needs of the blind individual usually requires a greater amount than shown in the Budget Schedule. This additional need is provided for under Regular Expenses Incident to Blindness. (See II 9.)

5. Household Operations

This includes cleaning supplies, replacement of ordinary household supplies and equipment, etc., and the amount shown in the Budget Schedule represents the minimum need for every individual unless his living plan is such that he has no responsibility for providing these items as in the case of one who pays board and room. There may occasionally be special needs in connection with household operations, and when the minimum amount as shown in the Budget Schedule is inadequate, the need for special items may be included as a special need. (See Item V - "Special Needs - Definition and Determination thereof.")

6. Utilities

Those utilities or services actually used by the individual represent his need. The amount allowed for the individual utility item may be as paid or the amount set forth on the Budget Schedule. If there is need for wood, coal, oil, garbage service, etc., the average cost of the particular item represents the need. When there are two or more members of the household, and the recipient reports that he pays only his prorated share, the amount as paid is the need.

7. Incidentals

This item includes a wide variety of expenditures, as determined by the individual's personal habits and needs; for instance, hair cuts, tooth brushes and dentifrice, home medicine cabinet supplies, insurance, recreation, newspaper, community activities, etc. The amount shown in the Budget Schedule shall be included as the need of each recipient for incidentals.

8. Special Needs

In addition to the items specifically set forth in the Budget Schedule, there may be other requirements of the individual such as those indicated in Item V - Special Needs, i.e., medical care and/or dentures, telephone service, etc.

9. Regular Expenses Incident to Blindness

Blind persons have certain expenses which persons with sight do not need to incur. Every blind person should be in a position to meet these expenses incident to blindness. Some of these expenses are:

(a) Traffic conditions make it difficult for blind persons to get about without a guide. This entails expenses for special help such as the frequent use of a taxi, payment for special service, etc;

(b) Clerical assistance must often be secured on a short-duration, but frequent basis to supply essential reading and writing service;

(c) Minor repairs and home upkeep must usually be performed by hired help;

(d) Groceries and other commodities must often be ordered by telephone, usually resulting in higher prices for these commodities because they must be purchased from the more expensive stores which provide delivery service;

(e) Renovating and repair of clothing imposes an additional expense on blind persons, especially the added dry cleaning service required and the additional amount which must be expended for the purchase of clothing;

(f) House cleaning must usually be done by hired help on a periodic basis;

(g) Laundry service must usually be purchased each week for both the washing and ironing of clothes;

(h) Special appliances for the blind must often be purchased and/or repaired including white canes, braille paper and writing equipment, watches, talking-book machines, radio-phonographs.

III. EXAMPLES OF DETERMINATION OF GRANT BY MEANS OF BUDGET SCHEDULE:

Example A: A single recipient living alone pays rent of $20 a month. Rent includes water and garbage removal but does not include other utilities. Gas for cooking costs on an average of $2.35 a month. The recipient has to buy wood for heating at an average cost of $3.25 a month. He has no special needs. His only income is $10 a month from a son.

Total Need		Income	
Food	$40.65	Income from son	$10.00
Rent (Including water)	20.00	* * * *	
Electricity	1.20		
Gas	2.35	Total need	116.75
Wood for heating	3.25	Total income	10.00
Household operations	4.50	Budget deficiency	106.75
Clothing	8.80		
Incidentals	10.00	Grant	85.00
Transportation	6.00		
Regular expenses incident to blindness	20.00		
Total	116.75		

Example B: A single recipient lives in his own home, assessed value $800. Taxes average $8 a month, and a street assessment required payments on which average $1.05 a month, represents the only encumbrance. Upkeep is $2 a month. He has no special needs. He receives OASI in the amount of $10 a month.

Total Need		Income	
Food	$40.65	Net value of occupancy	$ 2.95 ($4 less $1.05)
Housing			
Taxes	8.00	OASI	10.00
Assessment	1.05	Total income	12.95
Upkeep	2.00		
Net value of occupancy	2.95	* * * *	
Electricity	1.20		
Gas	1.85	Total need	108.90
Water	1.40	Total income	12.95
Garbage removal	.50	Budget deficiency	95.95
Household operations	4.50		
Clothing	8.80		
Incidentals	10.00	Grant	85.00
Transportation	6.00		
Regular expenses incident to blindness	20.00		
Total	108.90		

Example C: A couple, each receiving Security for the Blind, live in their own encumbered home assessed at $1000. Taxes average $6 a month, required monthly payments on the total encumbrance are $20. Upkeep is $2 a month The couple state their monthly utility needs are: Electricity $2.60,

gas $3.50, water $1.50. The husband receives $20 a month veteran's pension. Necessary medical care for the wife costs $5 a month. The budget for the husband is as follows:

Total Need			Income	
Food		$40.65	Net value of occupancy	None
Housing			Veteran's pension after allowing ½ for wife	$10.00
Taxes	$ 6.00		* * * *	
Encumbrance	20.00		Total need	107.75
Upkeep	2.00		Total income	10.00
½ of	28.00	14.00	Budget deficiency	97.75
Net value of occupancy*		None		
Utilities**				
Electricity	2.60			
Gas	3.50			
Water	1.50			
½ of	7.60	3.80	Grant	85.00
Household operations		4.50		
Clothing		8.80		
Incidentals		10.00		
Transportation		6.00		
Regular expenses incident to blindness		20.00		
Total		107.75		

*To arrive at net value of occupancy (See Section 152-10, Occupancy Value of Homes Owned by Recipient) deduct from the table value the recipient's share of the encumbrance payment. In this case, the recipient's share of the encumbrance payment eliminates value of occupancy.

**The prorated share of utilities is allowed for each of the couple in computing his total need and each recipient fills in the affidavit at the bottom of the Budget Work Sheet (Form Bl 241, copy attached hereto) as to the amount of his share of the utilities for the household.

The need of the wife is the same as that of her husband ($107.75) except that she has an additional need of $5 a month for medical care. Therefore, her total need is $107.75 plus $5 or $112.75, and her grant is determined as follows:

Total Need	Income	
$112.75	Net value of occupancy	None
	½ of veteran's pension received by husband	$10.00
	* * * *	
	Total need	112.75
	Total income	10.00
	Budget deficiency	102.75
	Grant	85.00

Example D: A single recipient earns $15.00 and in addition receives free rent and utilities in a rear cottage owned by a sister. The value of free rent

and utilities is determined to be $14 a month. There is no other income. The recipient has need for dentures and has made arrangements to purchase them, paying $15 a month for four months. He also requires regular medical care which costs $5.50 a month.

Total Need		Income	
Food	$40.65	Value of free rent and utilities	$14.00
Rent and utilities	14.00	Earnings	15.00
Household operations	4.50	Total income	$29.00
Clothing	8.80	* * * *	
Incidentals	10.00	Total need	124.45
Transportation	6.00	Total income	29.00
Dentures	15.00	Budget deficiency	95.45
Medical care	5.50		
Regular expenses incident to blindness	20.00	Grant	85.00
Total	124.45		

At the expiration of a four-month period, aid must be reduced as the need for dentures no longer exists. If other conditions remain the same, and the need for medical care continues, his total need, according to the budget method, will then be $109.45 instead of $124.45. The grant is adjusted as follows:

Total need	$109.45
Total income	29.00
Budget deficiency	$ 80.45
Grant	$81.00

Example E. A couple, both recipients, live in a three-room rear cottage on property owned by them. There is a five-room house on the same lot which is rented for $40 a month. The water bill for both houses is $4 a month and is paid by the couple. The total property is mortgaged, the required monthly payments being $24, of which amount $16 is interest and the balance is payment on the loan. The property is assessed at $1800 and taxes average $12 a month. The couple state their monthly utility needs are electricity $5.30 (used for lights and cooking). Each of the couple has medical need of $7 a month. Each spouse receives $10 a month as a gift from a son. The budget for each spouse will be the same and is computed as follows:

Total Need			Income	
Food		$40.65	Net value of occupancy	None
Housing*			Gift from son	$10.00
Net value of occupancy**		None	½ net from rental***	4.91
Taxes	$ 4.50		Total income	14.91
Encumbrance	9.00			
Upkeep	2.00		Total need	108.10
½ of	$15.50	7.75	Total income	14.91
Utilities			Budget deficiency	93.19
Electricity	5.30			
Water (3/8 x $4.00)	1.50		Grant	85.00
½ of	$6.80	3.40		

Household operations	$ 4.50
Clothing	8.80
Incidentals	10.00
Transportation	6.00
Medical need	7.00
Regular expenses incident to blindness	20.00
Total	108.10

*Since there are five rooms in the front house and three in the rear cottage, the expenses of ownership on the property occupied is based on 3/8 of the taxes, encumbrances, etc.

**Value of occupancy of rear cottage is based on the occupancy table for 3/8 of the total assessed value of the whole property (Section 152-10) less each spouse's share of 3/8 of the required encumbrance payment.

***From the $40 rental deduct 5/8 of the taxes, 5/8 of the interest (no deduction for principal payment), upkeep (determined according to formula, see Section 152-00) and 5/8 of the water bill which the couple pay for the total property. Since the income property is community property, each spouse has one-half of the net income.

Example F: A recipient in feeble physical condition pays $95 a month board and room in a rest home where all services are provided. He is unable to leave the house and has no need of transportation. He has income of $21 a month from OASI benefits and $10 a month from a daughter.

Total Need		Income	
Board and room	$95.00	OASI	$21.00
Clothing	8.80	Gift from daughter	10.00
Incidentals	10.00		31.00
Regular expenses incident to blindness	20.00	* * * *	
Total	133.80	Total need	133.80
		Total income	31.00
		Budget deficiency	102.80
		Grant	85.00

IV. FORM BL 241, SECURITY FOR THE BLIND BUDGET WORK SHEET, AND INSTRUCTIONS FOR USE

In all cases in which the amount of the grant is determined on the basis of total need as established by the budget method, the case record shall include the Budget Work Sheet (Form Bl 241), on which shall be recorded the full detail of the budget, the source and amount of income to be applied toward total need, and the verifications. Casual income is not considered in determining the grant of aid and shall not be entered on Form Bl 241. (See Sec. 150-60, Recording of Casual Income and Inconsequential Resources.)

The budget work sheet (Form Bl 241) will ordinarily be completed in long hand and shall be retained in the case record. It is desirable to complete the Budget Work Sheet (Form Bl 241) in duplicate, in which case a copy may be given to the applicant or recipient. Such a procedure would comply with the requirement that the applicant be given an itemized report setting forth the amount of Security granted, the type and amount of needs included and the income considered in determining the amount of Security.

Complete the identifying data in the upper right hand corner, and indicate if the recipient is living as a member of a household. If so, enter the number of individuals in the household.

A. Items of Need and How Verified

See Item II - Explanation of Items of Need in Budget Schedule.

1. Food (Leave blank if board and room is paid.)

From the Budget Schedule enter the amount for food in accord with the recipient's living plan, i.e., the smaller amount if living alone or as a member of a household group, and the larger amount if eating all meals in restaurants. No verification of the amount is required and no entry is necessary in the "How Verified" column. If the recipient takes his meals on a board basis, or pays for board and room, enter the amount as paid. Verification shall be made, either through receipts in the recipient's possession, by his personal affidavit, or otherwise, and the method used is indicated in the "How Verified" column.

If the recipient pays board and room, leave the "Food" item blank, and also leave blank all other items above Item 5, "Board and Room." (See instructions for Item 5.)

2. Housing (Leave blank if board and room is paid.)

If the recipient lives in other than his own property, enter the rental paid or his prorated share if two or more persons share the same quarters. The amount shall be verified, either through receipts or the recipient's personal affidavit or otherwise, and the method of verification entered in the "How Verified" column.

If free rent is contributed by another, enter the estimated value as determined. Enter "worker's evaluation" or some other appropriate statement in the "How Verified" column.

If the recipient lives in a home which he alone owns, complete the appropriate items for costs of ownership, including a $2 allowance for

upkeep. If there is a net value of occupancy under the provisions of Section 152-10, Occupancy Value of Homes Owned by Recipients, enter this amount also. If there is no net value of occupancy, enter "none" for this item. Record the total expenses of ownership and net occupancy value, if any.

When the recipient has an interest in the home with other persons, his prorated share of the expenses of ownership shall be shown, i.e., if home owned with wife, one-half of the expenses of ownership is entered; if owned jointly by three persons, one-third of the expenses of ownership is entered. (The value of occupancy, if any, is based on the total assessed value of the home.)

In the "How Verified" column, indicate the method by which taxes, encumbrances, etc., were verified, i.e., tax receipts, mortgage books, etc.

3. Utilities (Leave blank if board and room is paid.)

Enter the average amount as paid for the particular utility, or the amount shown in the Budget Schedule, in the appropriate space. When there is no need for the particular utility enter "none". If an amount is allowed for a utility or service other than as listed, specify opposite "other". When amounts as shown in the Budget Schedule are used for the utility items, no entry is necessary in the "How Verified" column. If the "as paid" amount is entered, verification shall be made, either through receipts in the applicant's possession, by his personal affidavit, or otherwise, and the method used is indicated in the "How Verified" column.

4. Household Operation (Leave blank if board and room is paid.)

Enter the amount shown in the Budget Schedule. When household furniture or equipment is inadequate or substandard to a point where the expense of securing necessary items is in excess of the cost of ordinary household operations, the cost of necessary replacement or of augmenting the present supply should be included under Item 9 of Form Bl 241. (See Item V, 7)

5. Board and Room

Enter the amount as paid. Verification is necessary, either through receipts in possession of the recipient or by his personal affidavit, or otherwise. In the "How Verified" column state how the amount was verified.

(Items of need above Item 5 do not apply to persons living on a board and room basis.)

6. Clothing

Enter the amount shown in the Budget Schedule. No entry is required in the "How Verified" column. The additional amount needed by blind persons for renovation of clothing is included under Item 10.

7. Incidentals

Enter the amount shown in the Budget Schedule. No statement is required in the "How Verified" column.

8. Transportation

Enter the amount as shown in the Budget Schedule unless the facts definitely establish that the recipient has no need for transportation and does not have other expenses in lieu of it, such as expenses for messenger service, etc. No entry is necessary in the "How Verified" column unless the transportation item is omitted, in which case give the reason either in that column or under "Remarks".

If the amount shown in the Budget Schedule is insufficient to cover necessary transportation costs, the amount actually needed is shown and the "How Verified" column must show how the need was determined.

9. Special Needs

Specify the particular need and show the amount for each need. In this space is entered only those needs which are in addition to the need items specifically set forth in the Budget Schedule. Verification must be made as set forth in Item V, Special Needs - Definition and determination thereof, and be recorded in the "How Verified" column, together with a statement of the probable period over which the need will continue.

10. Regular Expenses Incident to Blindness

Enter the amount shown in the Budget Schedule. No statement is required in the "How Verified" column.

11. Total Need

Enter the sum of the individual items of need.

B. Income Items and How Verified

Specify on Budget Work Sheet (Form B1 241) each source from which income (other than casual income and inconsequential resources) is received, including the net value of occupancy, if any, and the amount received from each source. In the "How Verified" column state the method of verification. Record the total amount of net income. (See Income Chapter of Manual of Policies and Procedures)

C. Summary:

Total Need. Enter the total need which is the amount recorded opposite Item 11 in the "Need" section of the form.

Total Income. Enter the total income received from all sources as recorded in the section immediately above the "Summary" section of the form.

Difference Between Need and Income. Enter that amount which is the result of subtracting the total income from the total need.

Amount of Security Recommended. Enter the amount of Security recommended. If the difference between total need and total income is in partial dollars, the grant shall be made in that figure which represents the next highest whole dollar.

Remarks. For comment as the worker may desire.

Budget Computed By. The signature of the worker computing the budget and the date are to be shown here.

D. Affidavit of Recipient:

When the amount of need for board or board and room, for rent, or for utilities is verified by the recipient's statement of his expenditures for one or more of these items, his affidavit is required and may be secured in this space. This space is otherwise left blank.

V. SPECIAL NEEDS, DEFINITION AND DETERMINATION THEREOF

There are many special needs incident to unusual circumstances which may be necessary to effect those physical, social, or economic adjustments required to promote the well-being of the individual blind person. Special needs shall be determined on the basis of the individual recipient's circumstances, and to the extent that is required to cover factual and realistic needs. These needs must be determined with reference to the health, comfort, and well-being of the individual recipient and not a family group.

Required payments on a debt represent a current need where the debt is secured by the recipient's home or is secured by his furniture or some other item of personal property which is a current necessity. The liquidation of debts not so secured may represent a current need if the debt was for a bona fide excess need and was incurred while a recipient of security. Payments on an unsecured debt incurred while not a recipient of security shall not be considered a current need.

The items listed below are not intended to be all inclusive and there are undoubtedly special needs of recipients which are not listed and which may well constitute an actual need.

The special needs which are most usually found to constitute special needs of the individual include:

1. Medical Care and/or Treatment under Other Healing Arts:

The need for care or treatment by a physician or surgeon, by the practitioner of any type of therapy, subject to licensing under the Business and Professions Code, by one giving treatment by prayer or spiritual means, or by other treatment recognized as a branch of the healing arts, represents a special need when verified by the physician or practitioner in attendance.

2. Sanatorium or Rest Home Care:

The type of care required should be designated by the physician or other practitioner in charge.

3. Medication:

Prescriptions and proprietary drugs or other medication prescribed by practitioners of any of the healing arts.

4. Eyeglass Prescriptions:

When ordered by a physician, optician, or an optometrist.

5. Special Diets:

On the written recommendation of a physician or other practitioner and in the amount that special diet exceeds the cost of the normal diet.

6. Occasional Repairs of Homes Owned and Occupied by Recipients:

If necessary to provide safe and healthful housing, or to minimize deterioration, the expense of occasional repairs represent a special need until allowance has been made for the cost of such repairs. The plan for payment agreed upon between the contractor or vendor and the recipient should be recorded in detail.

7. Replacement of Worn-out Household Equipment and/or Supplies, Clothing, etc.:

Household furniture, equipment, and/or clothing may be inadequate or substandard to a point where the expense of securing necessary items is in excess of ordinary upkeep. This may be the situation of persons whose income, prior to receipt of security, was insufficient to meet normal requirements. It also may result from a change in living plan. When such is the case, the cost of necessary replacement or of augmenting the present supply represents a special need.

Replacement of necessary household equipment and supplies, clothing, etc., destroyed in a catastrophe such as fire, flood, etc., represents a special need to the extent that such possessions have not been covered by insurance.

8. Housekeeping Service:

The cost of regular housekeeping service or its equivalent in housekeeping equipment represents a special need when the physical condition of the recipient is such that the service is required by him.

9. Nursing Service:

The need for nursing service should be designated by the physician or other practitioner in charge, or in the unusual case in which there is no such person in attendance, by the worker, and the cost of such care should not exceed the average cost of that type of care in a given community.

10. Occasional Unusual Needs:

The occasional or unusual needs which may be due to accident or ill health, or which may be necessary to preserve health and normal activity constitute special needs and such need may be established by the worker. Among these needs are:

(a) Dentures and/or dental work
(b) Hearing aids.
(c) Trusses or orthopedic appliances, wheel chairs, crutches, artificial eyes, etc.
(d) Dressings and other sick room supplies.

11. Personal Services:

When the blind person must purchase on a regular basis personal services, such as a personal guide, reader, etc., the cost of such personal services constitute a special need.

Many blind persons have need for a guide dog. The blind persons estimate of cost of food, veterinarian fee, etc., required for the maintenance of a guide dog can be verified by a letter to one or more of the guide dog schools located in California. Experience with this type of need would seem to indicate that an allowance of $30 a month for the maintenance of a guide dog would be reasonable, and this sum may be used in lieu of individual determination in each instance.

12. Telephone:

The cost of a telephone shall be allowed routinely when the recipient has one. When the use of pay telephone is necessary for the recipient's welfare, the cost of such telephonic service represents a special need.

VI. METHOD OF REPORTING GRANT INCREASES DUE TO USE OF BUDGET METHOD

Grant increases may be reported by use of the Notice of Change, Form Bl 232, in the usual manner, or they may be reported by list.

If lists are used to report the increases they must be submitted in duplicate and the cases must be listed in numerical order according to state number. The following statement must appear at the beginning of each list:

The following recipients of Security for the Blind are entitled to an increase effective January 1, 1949, to adjust their grants on the basis of the Security for the Blind Budget.

State Number	Name	Amount of Grant From Date of Change	Total Income Other Than SB	Source and Amt. of Income	Total Need

On the last page of the list the certification of the deputy director SDSW shall be affixed as follows:

> I certify that the persons listed on pages_____ through_____ are eligible to Security for the Blind in the amount set forth opposite each name, that supporting evidence is in the case record where it is open to inspection by duly authorized state and federal representatives, and I authorize payments to be made to said persons in the amounts specified.
>
> _____ _____
> Deputy Director SDSW Date

The deputy director's signature may be the original or a facsimile.

Should recipients be eligible to receive payment in an increased amount from the first of a month subsequent to January 1, 1949, separate lists shall be prepared according to the month in which the increase is first effective. The beginning date shall be stated in the statement appearing at the top of each such list.

An additional supply of the Budget Work Sheet (Form Bl 241) is being sent under separate cover.

Very sincerely yours,

Myrtle Williams

MYRTLE WILLIAMS, Director
Department of Social Welfare

Attachment

State of California
Department of Social Welfare

BUDGET WORK SHEET
SECURITY FOR THE BLIND

Case Name: Sarah Blank
State No. 372931 County:
Living as a member of household group: X Yes ___ No
If yes, number in household: 2

Complete only those items which represent need of the blind individual. If the individual pays board and room leave blank all items above No. 5 on this form.

NEED

Item of Need		Amount	How Verified
1. Food		$40.65	
2. Housing (a) Rent			
(b) Own Home: Taxes	6.00		Tax receipt
Assessments			
Encumbrance	12.00		mortgage Book
Upkeep	2.00		
Net value of occupancy* (if any)			
TOTAL	1/2 of $20.00	10.00	
3. Utilities: Gas	3.50		affidavit
Electricity	2.60		
Water	1.50		
Other	3.15		
TOTAL	1/2 of $10.75	5.37	
4. Household Operations		4.50	
5. Board and Room			
6. Clothing		8.80	
7. Incidentals		10.00	
8. Transportation		6.00	
9. Other Needs (Specify) Dentures		15.00	Broke old plate. Dentist signed statement that cost is $60, and to pay $15 a month. Need will continue 4 months
10. Regular Expenses Incident to Blindness		20.00	
11. Total Need		120.32	

INCOME (Do not include casual income or value of inconsequential resources)

Source	Amount	How Verified
NET VALUE OF OCCUPANCY, IF ANY		
Son	$10.00	Letter from Son
O. A. S. I.	25.50	O. A. S. I. award letter
TOTAL INCOME	35.50	

SUMMARY

TOTAL NEED	$120.32
TOTAL INCOME	35.50
DIFFERENCE BETWEEN NEED AND INCOME	84.82
AMOUNT OF SECURITY RECOMMENDED	85.00

REMARKS:

Budget Computed by: Mary Roe Date: 1-20-49

*If there is a net value of occupancy, always enter the identical amount shown here in the income section

AFFIDAVIT OF RECIPIENT OF SECURITY FOR THE BLIND

This Is To Certify, That I, Sarah Blank, pay $_____ per month for rent; $_____ per month for board or $_____ per month for board and room; and that the average monthly cost of my utilities is $ 5.37.

Subscribed and sworn to before me this 20th day of January 1949.

NAME: Mary Roe TITLE: Deputy County Clerk
Signature of Person Authorized to Acknowledge an Affidavit

Sarah Blank
Signature of Affiant

Form Bl 241, January 1949

Certified as a Regulation (or as Regulations) of the

Dept of Social Welfare
(Name of State Agency)

Myrle Cralley
(Signature)

Director
(Title)

2-2-49
(Date)

NA 1C 2140,3075

MYRTLE WILLIAMS
Director

STATE OF CALIFORNIA
DEPARTMENT OF SOCIAL WELFARE
616 K STREET
SACRAMENTO 14

January 26, 1949

FILED
in the office of the Secretary of State
of the State of California

FEB 4- 1949

At 11:45 o'clock A. M.
FRANK M. JORDAN, Secretary of State
By Robert E. Jordan
Assistant Secretary of State

DEPARTMENT BULLETIN NO. 335-A (Fiscal)

TO: COUNTY BOARDS OF SUPERVISORS
COUNTY WELFARE DIRECTORS
COUNTY AUDITORS

Subject: Submission of Estimates for Old Age Security and Security for the Blind in Counties Operating under the Agreement Plan

Bulletin No. 335 (Fiscal) is hereby amended.

Estimates for advances of funds to counties for Old Age Security and Security for the Blind, for March 1949 and subsequent months, will be submitted on Forms Ag 809A and Bl 809A, Revised January 1949. Copies of the new form are attached. A three months' supply is forwarded under separate cover this date.

Four copies of each of these forms are to be submitted to the State Department of Social Welfare by the 10th of the month prior to the month to which the estimates apply. The first estimates on the new form are due on February 10 for the month of March.

The amounts to be inserted in the attached forms are inclusive of the Federal share. No separate estimate of the Federal share is required.

Advances for ANC and APSB will continue to be made as outlined in Bulletin No. 335.

Estimate Forms

The present forms provide for an itemization of the administrative expense estimate. The department's funds for administration are subject to a budgetary limitation. Hence, the department must be aware of the nature of, and reasons for, the proposed expenditures under the agreements in order that the joint operations of the State and the counties shall proceed on a soundly planned basis.

The information requested on number of cases and security payments is self-explanatory.

The information requested under each category of administrative expense is as follows:

a. Salaries and Wages. Show the total amount estimated to be charged to the advance.

b. Maintenance and Operation Do not include charges for rent of space. Include all other operating expense, such as office supplies, automobile operating expense, telephone, telegraph, etc.

c. Rent Report all estimated rental charges, including charges for rent of county-owned premises.

d. Equipment Include the cost of the equipment covered by the request, except that the estimated cost of equipment $500 or over per item, and not in the county budget, is not to be included in the regular estimate. This should be submitted on a separate estimate.

e. Other Include the amount for any other proposed expenditures of the county, not classified above.

Prior Over-Estimates

If the county finds that it has overestimated in past months, it may enter the amount of such overestimate on line 4, and request a net sum on line 5.

Detail Support of Estimate

Include with the estimate a statement explaining:

a. The need for the amounts requested for salaries and wages. The amount is to be supported in terms of an estimate of equivalent full-time positions for social work and other positions (separately), and the estimated work load. In specifying the work load, not only should estimates of applications received, applications pending and approved cases be given, but data upon specific operations, such as reinvestigations. An indication should be given regarding the extent to which the equivalent full-time positions represent (1) new personnel over the level of positions authorized by the board of supervisors as of December 1, 1948, and (2) shifts of agency efforts to aged and blind activity from other programs, since December 1, 1948.

b. The need for any unusual items in the maintenance and operation category.

c. The need for the equipment expected to be purchased, showing (1) description, (2) number of items of each kind, and (3) estimated cost. Justify the proposed purchases in relation to personnel, increased efficiency, and other factors. An attempt should be made to be as specific as possible. As an example, typewriters might be justified by showing the number of additional typists necessary to provide clerical service for a number of additional caseworkers, and the extent to which the purchase of new typewriters was therefore essential. In other words, the consistency of personnel and equipment data should be demonstrated by means of yardsticks, where possible.

The above also applies for special estimates submitted covering items the individual cost of which is $500 or more.

d. In respect to the estimated rental charges, show the total square feet and the proportion of the footage used as the basis for the estimated charge to the program. Specify whether net or gross square feet are shown.

For estimated rental charges, divide the square feet of space and amount of money requested as to (a) rents paid to lessors and (b) rent for county-owned premises.

Rent and Repairs and Alterations

Rent for the use of county-owned premises will be allowed. The per-square-foot charge will depend upon (a) the prevailing rate in the community for like space, (b) the maintenance services which are charged to the State under some other category of expenditure, and (c) amortization of repairs and alterations, whether those now made or those for which there has been total reimbursement of the Federal share.

The cost of repairs and alterations to county-owned property will be amortized over the expected life of the improvement, and the monthly amortization charge will be considered part of the rental rate and will be subject to the general limitations upon such rate. A separate bulletin will be issued on the determination of the rental rate.

Repairs and alterations on rented premises will be allowed only as part of the rental rate.

Repairs and alterations are defined as improvements or structural changes in a building which result in a better piece of property in the sense of greater durability or increased value. The cost and anticipated life of the improvement or change will often determine whether it is to be considered a repair or alteration or merely a current maintenance repair. For example, the patching of a roof would be maintenance repair, but the replacement of a large part of a roof, with a life expectancy of several years would be considered a repair and alteration. In general, maintenance repair is defined as an expenditure which neither adds materially to the value of a building, nor appreciably prolongs its life, but merely keeps it in ordinary efficient operating condition.

Very sincerely yours,

Myrtle Williams

MYRTLE WILLIAMS, Director
Department of Social Welfare

Attachment

tate of California

Forward 4 copies to
State Department of Social Welfar
Sacramento 14, California

OLD AGE SECURITY--CLAIM FOR ESTIMATED EXPENDITURES

From _____ County

For the Month of _____, 1949

1. No. of Recipients _____ Amount of Security Payments $ _____

2. Administrative expense

a. Salaries and wages $ _____

b. Maintenance and operation other than rent $ _____

c. Rent $ _____

d. Equipment (show detail in attached sheet) $ _____

e. Other (show detail in attached sheet) $ _____

Total requested for administration $ _____

3. Total Items 1 and 2 $ _____

4. Prior over-estimates $ _____

5. Amount requested by county $ _____

For State Use Only

1. Amount requested by county $ _____

2. Adjustments by state $ _____

3. Total amount to be advanced $ _____

State of California)
) ss
County of _____)

_____, being duly sworn, deposes and says: That he is the county official responsible for the performance of the ministerial functions referred to in that certain agreement existing between the State Department of Social Welfare and this county relating to the administration of Old Age Security; that the above is a true and correct statement of the estimated expenditures to be made under the provisions of Article XXV of the Constitution and the operative provisions of the Welfare and Institutions Code; that these estimated expenditures do not include administrative costs under the agreement between the State Controller and this county relating to security payments.

Subscribed and sworn to before me this
_____ day of _____, 194__.

_____

Title _____

_____
Signature of Director or Official in Charge

Title _____

Approved for the Board of Supervisors

_____
Chairman, Board of Supervisors

For State Use Only
ADVANCE APPROVED--STATE
DEPARTMENT OF SOCIAL WELFARE

Name _____

_____ _____
Title Date

Form AC 809A, Revised January 1949

State of California

Forward 4 copies to
State Department of Social Welfare
Sacramento 14, California

SECURITY FOR THE BLIND--CLAIM FOR ESTIMATED EXPENDITURES

From _____ County

For the Month of _____, 1949

1. No. of recipients _____ Amount of Security Payments $ _____

2. Administrative expense

a. Salaries and wages $ _____

b. Maintenance and operation other than rent $ _____

c. Rent $ _____

d. Equipment (show detail in attached sheet) $ _____

e. Other (show detail in attached sheet) $ _____

Total requested for administration $ _____

3. Total Items 1 and 2 $ _____

4. Prior over-estimates $ _____

5. Amount requested by county $ _____

For State Use Only

1. Amount requested by county $ _____

2. Adjustments by state $ _____

3. Total amount to be advanced $ _____

State of California)
) ss
County of _____)

_____, being duly sworn, deposes and says: That he is the county official responsible for the performance of the ministerial functions referred to in that certain agreement existing between the State Department of Social Welfare and this county relating to the administration of Security for the Blind; that the above is a true and correct statement of the estimated expenditures to be made under the provisions of Article XXV of the Constitution and the operative provisions of the Welfare and Institutions Code; that these estimated expenditures do not include administrative costs under the agreement between the State Controller and this county relating to security payments.

Subscribed and sworn to before me this
_____ day of _____, 194__.

_____

Title _____

_____
Signature of Director or Official in Charge

Title _____

Approved for the Board of Supervisors

_____
Chairman, Board of Supervisors

For State Use Only

ADVANCE APPROVED--STATE DEPARTMENT OF SOCIAL WELFARE

Name _____

_____ _____
Title Date

Form BL 809A, Revised January 1949

Calif. Const. Art. XIV Sec 4

Myrtle Williams
Director

STATE OF CALIFORNIA
DEPARTMENT OF SOCIAL WELFARE
616 K STREET
SACRAMENTO 14

January 26, 1949

DEPARTMENT BULLETIN NO. 334-A (Security for the Blind - ANB)

TO: COUNTY BOARDS OF SUPERVISORS
COUNTY WELFARE DEPARTMENTS
COUNTY AUDITORS

Subject: Security for the Blind (Aid to Needy Blind) - Changes in Eligibility Requirements Effective January 1, 1949

Please make the following revision in Bulletin 334, issued December 13, 1948. On page 4, under the heading "Beginning Date of Security for the Blind", Item 3 should read as follows:

3. When the investigation is not completed within 60 days after signing of the application the investigation shall continue until completed. If the application is approved on the 61st or some subsequent day, payment shall begin as of the first of the month in which the application is approved or the first of the month following the end of the 60-day period, whichever is earlier. If, however, investigation established eligibility only from a date subsequent, Security for the Blind shall not be granted prior to the date on which the applicant becomes eligible.

The underscored words indicate the revision made, replacing the words "following the end of the 60-day period if eligibility is established as of that date".

Very sincerely yours,

Myrtle Williams

MYRTLE WILLIAMS, Director
Department of Social Welfare

FILED
in the office of the Secretary of State
of the State of California

FEB 4 - 1949

At 11:45 o'clock a.m.

FRANK M. JORDAN, Secretary of State

By Robert V. Jordan
Assistant Secretary of State

Certified as a Regulatic or as
Regulations) of the

Dept of ~~Public~~ Social Welfare
(Name of State Agency)

(Signature)

Director
(Title)

2-2-49
(Date)

Calif. Const.
Art. XXV, Sec 4

MYRTLE WILLIAMS
Director

STATE OF CALIFORNIA
DEPARTMENT OF SOCIAL WELFARE
616 K STREET
SACRAMENTO 14

January 26, 1949

FILED
in the office of the Secretary of State
of the State of California

FEB 4- 1949
At 11.45 o'clock a. M.
FRANK M. JORDAN, Secretary of State
By Robert K. Jordan
Assistant Secretary of State

DEPARTMENT BULLETIN NO. 351 (OAS, SB)

TO: COUNTY BOARDS OF SUPERVISORS
COUNTY WELFARE DEPARTMENTS
COUNTY AUDITORS

Subject: Retroactive Security Payments (OAS, SB)

Bulletin No. 333, Page 2, Paragraph 2, and Bulletin No. 334, Page 2, Paragraph 3 state:

> "If for any reason an applicant or recipient does not receive payment in the amount to which he is entitled as of January 1, 1949, payment shall be made retroactive to January 1, 1949."

Retroactive security under the above quoted ruling shall be paid to January 1, 1949, regardless of the elapsed period since that date, when either of the following conditions exist:

> The recipient received Old Age Security or Security for the Blind in December 1948 and should have received an increase effective January 1, 1949, to adjust the grant to conform to Article XXV of the State Constitution, but such increase was not made.

or

> The application was granted effective January 1, 1949, but through error the security grant was not made in accord with Article XXV.

With the exception of the foregoing, and the requirement for payment of retroactive security to adjust to the new budget schedule in OAS and SB (Bulletins 347 and 350) the following rule shall apply:

> If there was underpayment in months subsequent to December 1948 (due to a change in the recipient's need and/or income), the additional amount to which the recipient was eligible shall be paid retroactively whenever the payment can be authorized and delivered before the end of the second month following that in which the recipient was underpaid. (This ruling supersedes that appearing in Manual Section 361-25, Item 11.)
>
> Example 1: On July 10 it is established that a recipient of OAS had a special need in May, and had this been included in the budget for that month he would have been entitled to a grant of $75 whereas he was paid $70. Retroactive security in the amount of $5 for May is authorized and the warrant delivered on or before July 31.

Example 2: Reinvestigation is made in August at which time it is determined that income which a recipient of Security for the Blind had formerly received ceased in March and that he was entitled to a grant of $85 beginning April 1, whereas, he has been receiving a $65 grant. If it is possible to authorize and deliver the additional amount due on or before August 31, a supplementary payment is made for August and $20 retroactive security is paid for each of the months of June and July. (It is too late to make a retroactive adjustment for earlier months.) If it is not possible to deliver the additional amount due before the end of August, the retroactive security shall be authorized from July 1 and paid in September.

When it is determined that an application was erroneously denied, or security was erroneously discontinued, and the date of such action was after 1/1/49, the local Deputy Director, State Department of Social Welfare, shall rescind the erroneous action and retroactive security shall be paid under the following circumstances and limitations.

a) Recission of denial action on an application: The rescinding action must be taken within one year from the date of the action which is being rescinded. The beginning date of security is then governed by the intervening period between the date the application was signed, and the date the local Deputy Director, State Department of Social Welfare, grants the application.

b) Recission of an erroneous action discontinuing security: The rescinding action must be taken within one year from the date of the action which is being rescinded.

(The above statement supersedes Manual Section 361-25, Item 9.)

All other provisions of Manual Section 361-25 remain in effect except that in OAS and SB "Action by the local Deputy Director SDSW" should be substituted for action by the board of supervisors when the payments involved relate to January 1, 1949, or subsequent months.

Very sincerely yours,

Myrtle Williams

MYRTLE WILLIAMS, Director
Department of Social Welfare

TITLE 22 - CH. 2

Certified as a Regulation (or Regulations of the

Dept of Soc. Welfare

(Name of State Agency)

Myrtle Williams

(Signature)

Director

(Title)

2-4-49

(Date)

TITLE 22-CH2

MAIN OFFICE
SACRAMENTO
616 K STREET
14

LOS ANGELES OFFICE
MIRROR BUILDING
145 SOUTH SPRING STREET
12

SAN FRANCISCO OFFICE
GRAYSTONE BUILDING
948 MARKET STREET
2

STATE OF CALIFORNIA

Department of Social Welfare

MYRTLE WILLIAMS
DIRECTOR

Sacramento 14
February 4, 1949

FILED
in the office of the Secretary of State
of the State of California

FEB 4- 1949
At 3:30 o'clock P. M.
FRANK M. JORDAN, Secretary of State
By Robert T. Jordan
Assistant Secretary of State

IN REPLY PLEASE REFER
TO:

Hon. Frank M. Jordan
Secretary of State
Room 109, State Capitol
Sacramento, California

My dear Mr. Jordan:

Attached are three copies of the following regulations which are being filed in accordance with Section 11380 of the Government Code:

DEPARTMENT BULLETIN NO. 353
DEPARTMENT BULLETIN NO. 354

These regulations were issued on February 4, 1949 by the Director of the State Department of Social Welfare under authority of Section 4 of Article XXV of the California Constitution.

These regulations are to be effective immediately upon filing with the Secretary of State, since this has been found necessary for the immediate preservation of the public peace, health and safety or general welfare and that notice and public procedure thereon are impracticable, unnecessary or contrary to the public interest.

Very sincerely yours,

Myrtle Williams

MYRTLE WILLIAMS, Director
Department of Social Welfare

468:b5
Attachments

MYRTLE WILLIAMS
Director

Archives of the Calif Const.

STATE OF CALIFORNIA
DEPARTMENT OF SOCIAL WELFARE
616 K STREET
SACRAMENTO 14
February 3, 1949

FILED
in the office of the Secretary of State
of the State of California

FEB 4 - 1949
At 3:30 o'clock P. M.
FRANK M. JORDAN, Secretary of State
By Robert T. Jordan
Assistant Secretary of State

DEPARTMENT BULLETIN NO. 354 (OAS, SB)

TO: COUNTY BOARDS OF SUPERVISORS
COUNTY WELFARE DEPARTMENTS
COUNTY AUDITORS

Subject: OAS and SB--Determination of Security payments

Total need of applicants and recipients of OAS and SB shall no longer be determined on the basis of the budget method. Department Bulletin 347 issued January 14, 1949, announcing a new budget schedule in OAS and Department Bulletin 350 issued January 20, 1949, governing the use of the budget method for determining total need in Security for the Blind, are rescinded.

The following sections of the Manual of Policies and Procedures are rescinded in their entirety:

Sec. 155-25 (OAS) Total Need--Determination by Budget.
Sec. 155-26 (OAS) Form Ag 241, Budget Work Sheet and Instructions for Use.
Sec. 155-50 (OAS) Definition and Determination of Special Needs in OAS.
Sec. 156-25 (SB) Definition and Determination of Needs in Excess of Basic Continuing Needs.
Sec. 156-30 (ANB) Procedure for Establishing Needs in Excess of Basic Continuing Needs in ANB.
Sec. 156-50 (ANB) Grant of Aid in Whole Dollars in ANB.

Statements regarding the use of the Budget Plan for OAS appearing in any other sections of the Manual are rescinded.

The security payment shall be determined by deducting the income and the value of currently used resources (except casual income and inconsequential resources) from $75 in OAS and $85 in SB, except when the recipient has special items of need. The payment shall then be determined on the basis of the Excess Need Method.

I. EXCESS NEED METHOD

In addition to basic continuing needs the individual may have special needs arising out of impairment of health, physical handicap, etc. When such special needs exist the recipient's total need shall be determined by adding the cost of special items of need to $75 in OAS and $85 in SB. The amount of the security payment is then determined by subtracting the income from the total need. When the difference is not in whole dollars the security payment shall be adjusted to the next higher whole dollar but in no event may the grant exceed $75 in OAS or $85 in SB. The amount of the security payment plus the income of the individual shall not exceed the total need except to the extent that the grant is adjusted to the next higher whole dollar.

A. Basic Continuing Needs

Since the law provides that the income together with the amount of the grant shall equal at least $75 in OAS, this amount is considered to cover continuing needs common to all OAS recipients. In Security for the Blind $85, the maximum payment, is considered to cover basic continuing needs common to all blind recipients.

The basic continuing needs common to all recipients which are presumed to be met on $75 a month in OAS, and $85 a month in SB include:

1. Food--The normal amount and kind of food needed to maintain health and vigor. This is considered to be $28.50. If the recipient pays board and room or eats his meals in restaurants, see Definition of Special Needs on page 5 of this bulletin.

2. Housing--Adequate, suitable, sanitary housing, in the locality chosen by the applicant or recipient. If the cost of rent, or the ownership costs of the home which the recipient owns and occupies exceed $15, see Definition of Special Needs on page 5.

3. Utilities--Lights, water, and fuel needed to maintain health and comfort. Whenever the total amount required to meet the various utilities the recipient uses exceeds $6.30 the excess represents a special need.

4. Clothing--Adequate, healthful clothing. A total of $6.20 a month is considered necessary to meet this need.

5. Household Maintenance and Replacements--The occasional replacement of small items of household equipment and/or supplies. The normal amount required to meet this need is $4.50.

6. Transportation and Communication--Carfare in the amount of $4.50 for social and ordinary shopping purposes or gasoline for automobile used for such purpose, stamps, stationery, etc. If there is extra transportation cost to receive medical care i.e., trips to the doctor, clinic, or to meet emergencies, etc., see Definition of Special Needs on page 5 of this bulletin.

7. Incidentals--The usual expenditures for haircuts, recreation, including expenses necessary to maintain normal social contacts, etc., totalling $10.

8. Added Allowance for Blindness (SB only). In addition to the basic needs set forth above, an allowance of $10 is required since the overall cost of basic needs to a blind person is more than the cost to a person without such handicap.

B. Definition and Determination of Special Needs

Needs in excess of the basic continuing needs (special needs) shall be determined on the basis of the individual recipient's circumstance, and to the extent that is required to cover factual and realistic needs. These needs must be determined with reference to the health, comfort, and well-being of the individual recipient and not a family group.

In those instances where there is income including the value of currently used resources, there shall be recording in the case record concerning discussion with the recipient as to any special needs he may have and the amount required to meet such special needs; also the determination with regard to the establishment of need in excess of basic continuing needs. Emphasis must be placed upon recognition of special needs which exist. Allowance shall be made for special needs in determining the total need of the applicant or recipient on the basis of his written or oral statement when the amount needed to meet the special need appears reasonable. Verification is required when the cost as reported by the recipient appears to be excessive.

Required payments on a debt represent a current need where the debt is secured by the recipient's home or is secured by his furniture or some other item of personal property which is a current necessity. The liquidation of debts not so secured may represent a current need if the debt was for a bona fide excess need and was incurred while a recipient of aid. Payments on an unsecured debt incurred while not a recipient of aid shall not be considered a current need.

The items listed below are not intended to be all inclusive and there are undoubtedly special needs of recipients which are not listed and which may well constitute an actual need. Conversely, the fact that an item has been listed as a possible need in excess of basic continuing needs does not imply that every expenditure for such item is automatically such a need.

The special needs which are most usually found to be in excess of basic continuing needs of the individual recipient include:

1. Medical Care and/or Treatment Under Other Healing Arts:

   The need for care or treatment by a physician or surgeon, by the practitioner of any type of therapy, subject to licensing under the Business and Professions Code, by one giving treatment by prayer or spiritual means, or by other treatment recognized as a branch of the healing arts, represents a special need.

2. Sanatorium or Rest Home Care:

   The type of care required should be designated by the physician or other practitioner in charge of the case.

3. Medication:

   Prescriptions and proprietary drugs or other medication prescribed by practitioners of any of the healing arts.

4. Eyeglass Prescriptions:

   When ordered by a physician, optician, or an optometrist.

5. Special Diets:

   The amount that special diet exceeds the cost of the normal diet.

6. Occasional Repairs of Homes Owned and Occupied by Recipients:

If necessary to provide safe and healthful housing, or to minimize deterioration, the expense of occasional repairs represent special need until allowance has been made for the cost of such repairs. The plan for payment agreed upon between the contractor or vendor and the recipient should be recorded in detail.

7. Replacement of Worn-out Household Equipment and/or Supplies, Clothing, etc.:

Household furniture, equipment, and/or clothing may be inadequate or substandard to a point where the expense of securing necessary items is in excess of ordinary upkeep. This may be the situation of persons whose income, prior to receipt of aid, was insufficient to meet normal requirements. It also may result from a change in living plan. When such is the case, the cost of necessary replacement or of augmenting the present supply represents special need.

Replacement of necessary household equipment and supplies, clothing, etc., destroyed in a catastrophe, such as fire, flood, etc., represents need in excess of basic continuing needs to the extent that such possessions have not been covered by insurance.

8. Housekeeping Service:

The cost of housekeeping service or its equivalent in housekeeping equipment represents need in excess of basic continuing needs when the physical condition of the recipient is such that the service is required for the well-being of the individual recipient. This involves the cost of outside help to do occasional heavy cleaning, such as floors, woodwork, windows, etc., for persons who maintain their own household or live in a rented room where such service is not furnished without charge.

9. Nursing Service:

The need for nursing service when the physical condition of the recipient is such that such service is required.

10. Excess Utilities:

The cost of utilities represents a special need to the extent that the total cost of various utilities used by the recipient exceeds $6.30 a month.

11. Occasional Unusual Needs

The occasional or unusual needs which may be due to accident or ill health, or which may be necessary to preserve health and normal activity. Among these are:

(a) Dentures and dental work.
(b) Hearing aids.
(c) Trusses or orthopedic appliances, wheel chairs, crutches, etc.
(d) Dressings and other sick room supplies.

12. Laundry:

The cost of laundry service represents a special need when the recipient does not have facilities for doing the laundry himself or when his health or handicap prevents such activity.

13. Dry Cleaning:

The cost of necessary dry cleaning represents a special need. Unless unusual circumstances exist, the amount required to clean one major item of clothing per month is allowed, i.e., suit, dress, coat, etc.

14. Automobile Expense:

When the individual's automobile represents a need (i.e., when it is considered exempt personal property) expenses incident to ownership, i.e., license fee, insurance premium, and repairs, constitute special needs. The annual cost of the Motor Vehicle fee and insurance shall be allowed on a prorated basis. The cost of repairs represents a special need until allowance has been made for the cost thereof.

15. Transportation:

The statutory grant of $75 ($85 in SB) includes a minimum allowance for transportation to cover the cost of shopping and/or social trips. When the recipient has additional transportation needs for trips to the doctor, clinic, etc., such additional transportation expense represents a special need.

16. Housing:

When rent, or the ownership costs of the house which is owned and occupied, exceeds $15, the amount in excess thereof represents a special need.

17. Food:

When the recipient eats his meals in restaurants, the additional cost thereof represents a special need and allowance in the amount of $21 shall be made for this additional expense.

18. Board and Room:

If the recipient pays board and room, and the charge for this item of need is in excess of $60 in OAS or $70 in SB, the excess represents a special need.

19. Telephone:

The cost of a telephone shall be allowed when the recipient has one. When the use of pay telephones is necessary, the cost of such service represents a special need.

20. Special Needs of Blind Persons (SB only):

The following items are among those additional needs which may be necessary to effect physical, social, or economic adjustment of the blind recipient in which event they represent needs in excess of basic continuing needs.

(a) Personal services, such as a personal guide, reader, etc.
(b) Guide dog, and/or maintenance therefor. The recipient's estimate of the cost of food, veterinarian fee, etc., required for the maintenance of a guide dog can be verified by the worker through a letter to one or more of the guide dog schools located in California. Experience with this type of need would seem to indicate that an allowance of $30.00 a month for the maintenance of a guide dog would be reasonable.
(c) Radio phonograph and/or radio phonograph repairs.
(d) Talking Book and/or Talking Book repairs.
(e) Typewriter and/or Braille writer.
(f) Artificial eyes.
(g) Special appliances for the blind (including purchases and/or repair) such as white canes, watches, Braille slates.
(h) Clerical assistance must often be secured on a short duration, but frequent basis to supply essential reading and writing service.

II. NEW APPLICATIONS

The security payment on all new applications, reapplications and restorations to be effective March 1, 1949, or thereafter shall be determined in accord with the provisions of this bulletin.

III. CURRENT CASES

All necessary grant adjustments in current cases shall be made not later than April 1, 1949. In no case shall overpayment or underpayment in a prior month be considered to have occurred when the recipient's grant was correct on the basis of his income and the total need determined by the budget schedule then in effect. The adjustments may be reported by individual Notice of Change or by use of a list.

If lists are used to report the increase, they must be submitted in duplicate and the cases must be listed in numerical order according to State number. The following statement must appear at the beginning of each list.

The security payments of the following recipients of OAS (SB) are adjusted effective (insert date) on the basis of their total need determined by adding the cost of special items of need to $75 ($85 in SB).

State Number	Name	Amt. of Grant From Date of Change	Total Income Other Than Grant	Source and Amount of Income	Total Need

The certification of the local Deputy Director SDSW shall be affixed on the last page of the list as follows:

I certify that the persons listed on pages ___through___ are eligible to OAS (SB) in the amount set forth opposite each name, that supporting evidence is in the case record where it is open to inspection by duly authorized State and federal representatives, and I authorize payments to be made to said persons in the amounts specified.

_____ Deputy Director SDSW

_____ Date

Very sincerely yours,

Myrtle Williams

MYRTLE WILLIAMS, Director
Department of Social Welfare

Art XXV of the Calif Const.

MYRTLE WILLIAMS
Director

STATE OF CALIFORNIA
DEPARTMENT OF SOCIAL WELFARE
616 K STREET
SACRAMENTO 14

February 3, 1949

FILED
in the office of the Secretary of State
of the State of California

FEB 4- 1949
At 3:30 o'clock P. M.
FRANK M. JORDAN, Secretary of State
By Robert V. Jordan
Assistant Secretary of State

DEPARTMENT BULLETIN NO. 353 (OAS, SB)

TO: COUNTY BOARDS OF SUPERVISORS
COUNTY WELFARE DEPARTMENTS
COUNTY AUDITORS

Subject: Limitations on Personal Property — Old Age Security and Security for the Blind

Article XXV of the California State Constitution has, as one of its basic purposes, the giving of security to every aged and blind person eligible therefor and who is needy according to the provisions laid down by the Federal Government. Article XXV sets certain maxima on those different types of reserves which may be retained to meet those contingencies of life faced by all applicants and recipients - the costs of medical emergencies and lump-sum outlays for major repairs to a home, medical and/or hospital expenses incident to a terminal illness, and burial expenses.

In compliance with requirements laid down by the Federal Government the following limitations are set on the various types of allowable reserves which applicants and recipients may possess, and constitute modifications of the rules pertaining to this subject contained in Department Bulletins No. 333 (OAS) and 334 (SB):

A. Non-Exempt Personal Property

The maximum total amount of all personal property (except those items specifically exempted under B) which may be owned is $1500, after encumbrances of record have been deducted. The $1500 limitation includes:

1. Cash and securities;

2. The cash surrender value of a policy or policies of insurance on the life of the applicant or recipient;

3. The value of any motor vehicle not used for personal transportation;

4. The value of jewelry other than personal jewelry;

5. The value of a burial trust or similar fund;

6. The current market value of all other items of personal property, except those items specifically exempt.

The value of items of personal property shall be determined in accord with the procedures set forth in the Personal Property Chapter of the State Manual of Policies and Procedures in determining the applicant's or recipient's eligibility with respect to personal property holdings.

B. Exempt Personal Property

The following items of personal property owned by the applicant or recipient are exempt from consideration in determining personal property holdings:

1. "Personal effects" including clothing, personal jewelry, furniture, household equipment, livestock retained for family use only, foodstuffs, fuel, interment plots;

2. A motor vehicle when used for personal transportation. A motor vehicle is not exempt from consideration when (a) the vehicle represents an investment rather than a piece of equipment for personal use; (b) the vehicle is in storage; or (c) the vehicle is of a new and expensive type beyond the means of a person with income limited to a security grant.

3. The proceeds received from the sale of the home under condemnation proceedings is exempt personal property during the one year period subsequent to the date payment is received.

Very sincerely yours,

Myrtle Williams

MYRTLE WILLIAMS, Director
Department of Social Welfare

TITLE 22. - CH 2

MAIN OFFICE
SACRAMENTO
616 K STREET
14

LOS ANGELES OFFICE
MIRROR BUILDING
145 SOUTH SPRING STREET
12

SAN FRANCISCO OFFICE
GRAYSTONE BUILDING
948 MARKET STREET
2

STATE OF CALIFORNIA

Department of Social Welfare

MYRTLE WILLIAMS
DIRECTOR

Sacramento 14
February 7, 1949

RECEIVED
SACRAMENTO, CALIF.
1949 FEB 8 PM 12 34
FRANK M. JORDAN
SECRETARY OF STATE
STATE OF CALIFORNIA

Hon. Frank M. Jordan
Secretary of State
Room 109, State Capitol
Sacramento, California

IN REPLY PLEASE REFER TO:

My dear Mr. Jordan:

Attached are three copies of the following regulations issued by the State Department of Social Welfare with Boarding Home Manual Letter No. 15.

These regulations were adopted by the State Social Welfare Board on January 28, 1949, pursuant to the powers conferred upon it by the Welfare and Institutions Code under Sections 103 and 114b and are filed in accordance with provisions of Section 11380 of the Government Code.

This material was previously filed with your office on January 28, 1949. It is now being sent to you in manual form.

Very sincerely yours,

Myrtle Williams

MYRTLE WILLIAMS, Director
Department of Social Welfare

468:b5
Attachments

TITLE 22 - CH 2

Certified as a Regulation (or
Regulations of the

Dept of Social Welfare

(Name of State Agency)

Myrle Williams

(Signature)

Director

(Title)

2-7-49

(Date)

MYRTLE WILLIAMS
Director

STATE OF CALIFORNIA
DEPARTMENT OF SOCIAL WELFARE
616 K STREET
SACRAMENTO 14

February 4, 1949

164

BOARDING HOME MANUAL LETTER NO. 15

The attached revisions 82 through 84 are to be entered in your copy of the Manual of Boarding Homes for Aged and Children and the revision numbers canceled on the inside of the manual cover.

These revisions were adopted by the Social Welfare Board on January 28, 1949, and are to be effective March 1, 1949.

Sections VIII-600 and VIII-700 as revised clarify previous instructions for completion and submission of the Statistical Report on Children Under Foster Care (Form CPA 41). All children under foster care supervised by the reporting agency, including children over 16 years of age are to be included. Reports shall be submitted each month even though no children under foster care are supervised during the month by the reporting agency.

FILED
in the office of the Secretary of State
of the State of California

FEB 8 - 1949

At 1.30 o'clock P. M.

FRANK M. JORDAN, Secretary of State

By Robert L. Jordan
Assistant Secretary of State

VIII-600 (Continued) VIII-600

5. Minor services such as referral of parents to a licensed foster home.

Reporting Agencies

Monthly and quarterly statistical reports on Form CPA-41 shall be submitted by the following:

1. Private child placing agencies licensed by the SDSW (except agencies which are exclusively adoption agencies).

2. County welfare departments which supervise children under foster care.

Reporting Plan

Form CPA-41 includes:

1. Monthly data on the number of children under foster care supervised by the reporting agency and the number of children for whom such foster care service was terminated, and

2. Quarterly data on the location by county of the children under foster care and the number of foster homes and institutions in use.

Submission Instructions

Three copies of Form CPA-41 (both the monthly and quarterly reports) shall be submitted by the above specified agencies so as to be received by the SDSW, Bureau of Research and Statistics, 616 K Street, Sacramento 14, not later than the 15th day of the month following the month covered by the report. Reports shall be submitted each month even though no children under foster care are supervised during the month by the reporting agency.

VIII-500 (Continued) VIII-500

18. Homes holding licenses at end of month. Enter the number of homes holding licenses at the end of the month. This item is found by substracting Items 15, 16, and 17 from Item 14.

Refer to Appendices XI and XII for suggested statistical file and clerical procedure in compiling statistical reports.

VIII-600 MONTHLY STATISTICAL REPORT ON CHILDREN UNDER FOSTER CARE AND QUARTERLY REPORT ON LOCATION BY COUNTY OF CHILDREN UNDER FOSTER CARE (FORM CPA-41) VIII-600

Purpose

The purpose of these reports is to provide the SDSW with data on the number and location of children in foster care under the supervision of private child placing agencies and county welfare departments and on the type of facilities in which the children are placed.

Coverage

Include all children in foster care who are being supervised by the reporting agency whether or not the placement was made by the agency.

Include all children supervised by the reporting agency whether the facility is licensed, unlicensed, or not subject to license. This includes facilities under the licensing jurisdiction of the SDSW, the State Department of Mental Hygiene, or the State Department of Public Health.

Also include children 16 years of age or over under foster care supervised by the reporting agency.

Exclude the following:

1. Children in homes of

   a. Persons who have filed petitions for their adoption, or
   b. Persons with whom the relinquished child has been placed for adoption

2. Children under day care only

3. Children under supervision by the agency in their own homes or in homes of close relatives

4. Children placed by parents, guardians, relatives, or probation officers for whom the reporting agency has no responsibility for supervision

(Section Continued on Next Page)

VIII-700 (Continued) VIII-700

Item 4. Children for whom foster care was terminated during month. Enter in the appropriate column the number of children for whom foster care was terminated during the month. A child moved from a foster family home to an institution is to be reported as a termination from foster family care, and vice versa. Children placed in a foster family home during this month or in a previous month and moved to another foster home during this month are to be excluded from this item. This applies also to children moved from one institution to another. Foster care for a child is to be considered terminated during the month in which the agency learns that the child is in the home of persons who have filed an independent petition to adopt the child or during the month in which a child relinquished to the agency is placed in the home of adoptive parents.

Item 5. Children under foster care on last day of month. Enter in each column the difference between the entries in Items 3 and 4 in that column.

QUARTERLY REPORT ON LOCATION BY COUNTY OF CHILDREN UNDER FOSTER CARE

Complete this report quarterly for children under foster care on the last day of the following months (reported in Item 5 of the report for the month) March, June, September, and December.

County of Location. Enter in this column the counties in which children placed by your agency are located on the last day of the month.

Column 1. Number of children in foster family homes. Enter opposite the county name the number of children placed by your agency in foster homes located in that county. Enter the total of the entries in this column opposite "Total" at the foot of the column; this figure should be the same as the entry in Item 5, Column 1, of the monthly report.

Column 2. Foster family homes in use. Enter opposite the county name the number of foster family homes in use by your agency in that county. Enter the total of the entries in this column opposite "Total" at the foot of the column.

Column 3. Number of children in institutions. Enter opposite the county name the number of children placed by your agency in institutions located in that county. Enter the total of the entries in this column opposite "Total" at the foot of the column; this figure should be the same as the entry in Item 5, Column 2, of the monthly report.

Column 4. Number of institutions in use. Enter opposite the appropriate county the number of institutions in use by your agency in that county. Enter the total of the entries in this column opposite "Total" at the foot of the column.

VIII-700 INSTRUCTIONS FOR COMPLETING FORM CPA 41 VIII-700

MONTHLY STATISTICAL REPORT ON CHILDREN UNDER FOSTER CARE

Two columns are provided for reporting the type of foster care which the children placed and/or supervised by your agency are receiving. The two columns are to be mutually exclusive. A child moved from a boarding home to an institution, or vice versa, is to be reported as a foster care termination (Item 4) in one column and as a placement (Item 2) in the other column in the month in which the transfer takes place. Movements of children from boarding home to boarding home, or from institution to institution, during the same or different months, are not to be reported unless they result in a change in the agency supervising the child.

Column 1, Foster Family Care, includes children receiving care in a private family home which accepts for 24-hour care, with or without compensation, one to fifteen children (inclusive). However, if the home is so organized or administered that its service is essentially institutional in character, consider it an institution regardless of the number of children for whom care is provided.

Column 2, Institutional Care, includes children receiving care in a home which accepts for 24-hour care sixteen or more children or which is so organized or administered that its service is essentially institutional in character regardless of the number of children for whom care is provided.

Item 1. Children under foster care on first day of month. Enter in the appropriate column the number of children receiving foster care under the supervision of the agency on the first day of the month. The entries in this item must be the same as the entries in the corresponding columns of Item 5, Children under foster care on last day of month, of the previous month's report; otherwise an explanation is necessary.

Item 2. Children placed under foster care during month. Enter in the appropriate column the number of children who were:

1. Placed under foster care and supervised by your agency during the month,

   or

2. Who were receiving foster care and were placed under the supervision of your agency during the month.

A child moved from foster family care to an institution, or vice versa, is to be reported in this item in the month in which the transfer takes place.

Item 3. Total children under foster care during month. Enter in each column the sum of the entries in Items 1 and 2 in that column.

(Section Continued on Next Page)

MAIN OFFICE
SACRAMENTO
616 K STREET
14

LOS ANGELES OFFICE
MIRROR BUILDING
145 SOUTH SPRING STREET
12

SAN FRANCISCO OFFICE
GRAYSTONE BUILDING
948 MARKET STREET
2

STATE OF CALIFORNIA

Department of Social Welfare

MYRTLE WILLIAMS
DIRECTOR

Sacramento 14
February 7, 1949

RECEIVED
SACRAMENTO, CALIF.

1949 FEB 10 PM 1 03

FRANK M. JORDAN
SECRETARY OF STATE
STATE OF CALIFORNIA

Hon. Frank M. Jordan
Secretary of State
Room 109, State Capitol
Sacramento, California

IN REPLY PLEASE REFER
TO:

My dear Mr. Jordan:

Attached are three copies of the following regulations issued by the State Department of Social Welfare with Manual Letter No. 128.

These regulations were adopted by the State Social Welfare Board on January 28, 1949, pursuant to the powers conferred upon it by the Welfare and Institutions Code under Sections 103 and 114b, and are filed in accordance with provisions of Section 11380 of the Government Code.

This material was previously filed with your office on January 28, 1949. It is now being sent to you in manual form.

Very sincerely yours,

Myrtle Williams

MYRTLE WILLIAMS, Director
Department of Social Welfare

468:b5
Attachments

TITLE 22-CA 2

Certified as a Regulation (or
Regulations of the

Dept of Soc. Welfare
(Name of State Agency)

Myrtle Williams
(Signature)

Director
(Title)

2/7/79
(Date)

MYRTLE WILLIAMS
Director

STATE OF CALIFORNIA
DEPARTMENT OF SOCIAL WELFARE
616 K STREET
SACRAMENTO 14

February 4, 1949

FILED
in the office of the Secretary of State
of the State of California

FEB 10 1949

At 1:30 o'clock P. M.
FRANK M. JORDAN, Secretary of State
By Robert V. Jordan
Assistant Secretary of State

1297

MANUAL LETTER NO. 128

The attached revisions to Section 800-18, CWS Educational Leave Plan for County Employee, are to be entered in your Manual of Public Assistance Policies and Procedures and revision numbers 13 through 16 canceled on the separator of the Child Welfare Services Chapter.

These revisions were adopted by the Social Welfare Board on January 28, 1949, and are to be effective March 1, 1949.

The agreement between the employee and the county welfare department has been modified to specify that the employee upon his return from educational leave shall work for a specified period in the child welfare program.

The following sections pertaining to county residence and inter-county transfers no longer apply to OAS or Security for the Blind:

122-00	122-70	124-35
122-05	122-75	125-00
122-15	123-25	125-15
122-50	124-05	125-20
122-53	124-07	232-00
122-55	124-10	232-05
122-60	124-15	232-40
122-65	124-25	370-00

Please note that these sections which apply to APSB or ANC remain fully effective with respect to those programs. (See Department Bulletin No. 337.)

Section 123-05, Continuance of Aid While Recipient Absent from State, is suspended until further notice. (See Department Bulletin No. 349.)

In the Relatives Chapter the following sections are obsolete:

171-47	171-70	171-85
171-55	171-75	171-90
171-60	171-80	172-99
171-65		

The responsible relatives scale in Sec. 171-50 may be used in the determination of relatives' liability in APSB (see Section 172-05) but is obsolete with respect to OAS and Security for the Blind. All other sections in the Relatives Chapter now apply only to APSB and ANC. (See Department Bulletin No. 348.)

Sections 202-20 and 237-50 which give instructions for the completion of the Application Form and the Certificate of Verification of Eligibility apply to the completion of Forms APSB 200 and APSB 201. (See Department Bulletin No. 346.)

Revised instructions for reporting on the Old Age Security Permanent Sample Schedule (Form Ag 251) and the Social Data Record Card - Aid to the Blind (Form Bl 230) are given in Department Bulletin No. 342. The revisions affect the following sections:

287-59	292-40
287-75	292-45
292-03	292-65

Section 351-57 which outlines procedure for effecting transfers between Security for the Blind and Aid to Partially Self-supporting Blind Residents is now obsolete. See Department Bulletin No. 345 for revised procedure.

Items 9 and 11 of Section 361-25, Retroactive Aid Payments by County, now apply only to APSB and ANC. See Department Bulletin No. 351 for revised instructions on retroactive security payments.

The following sections which give instructions for reporting on the Notice of Change no longer apply to APSB. (See Department Bulletin No. 344.)

362-00	362-30
362-05	362-46
362-20	362-50

Sections 510-00 through 563-54 no longer apply to the Ag 237 and Bl 237 (Monthly Statistical Reports on OAS and Aid to the Blind) but remain fully effective otherwise. See Department Bulletin No. 339 for instructions for the completion of the revised forms Ag 237 and Bl 237 and the new form APSB 237, Monthly Statistical Report on APSB.

This manual letter does not mention <u>all</u> manual sections rendered obsolete by superseding department bulletins.

800-18 (Continued) 800-18

2. That the worker agrees to a review and evaluation of his performance at school by the CWS Educational Leave Committee, and further agrees to terminate his educational leave and return to his county of employment if so recommended by the committee.

3. That upon his return to work, the employee shall be entitled to all salary increments, vacation rights, etc., to which he normally would have been entitled had he remained on the job.

4. That the educational stipend shall be for tuition, special fees, books, living expenses while at school, and transportation to and from school; that the stipend shall be paid directly to the employee by the county; and that the stipend in no instance shall be greater than the CWS salary currently established for the county plus transportation to and from school.

5. That the educational leave shall be for a stipulated period of time at a specified school.

F. CWS Educational Leave Committee

The director of the SDSW shall appoint an educational leave committee consisting of representation from the SDSW, the County Welfare Directors' Association of California, and the graduate schools of social work in California.

A member of the Division of Personnel and Training of the SDSW shall be an ex-officio member of the committee. Employees and county welfare directors whose applications are before the committee for action are urged to attend the committee meetings; they may enter into the discussion, but they may not vote.

This committee shall perform the following functions:

1. Recommend amounts of educational stipends based upon tuitions, special fees, books, transportation to and from schools, and living costs at the schools, within the limits of the available CWS funds, and the policy set forth in foregoing paragraph E-4.

2. Select from among the applications received those counties and those employees who will benefit under this plan and establish a priority rating for each application.

3. Suggest improvements in the CWS Educational Leave plan.

(Section Continued on Next Page)

800-18 (Continued) 800-18

C. Schools and Courses of Study

Educational leaves under this plan shall be limited to graduate schools of social work which are accredited by the American Association of Schools of Social Work.

County employees granted leaves shall select only those courses which will add to their training as Child Welfare Workers, Supervisors, or Directors.

D. Length of Leaves

Educational leaves may be granted:

1. For a minimum of one school year (two semesters or three quarters) for workers who have had no graduate social work. After successful completion of one year's work at the school, the leave may be extended an additional period.

2. For the required period of time for workers who have had some graduate social work, but need additional training to complete one full year of graduate work. After successful completion of one year's work at the school, the leave may be extended an additional period to enable completion of a second year of graduate study planned toward a master's degree.

3. For the required period of time for workers with at least a year of graduate social work who need additional work to complete a second year of graduate study. After successful completion of the period of leave originally approved, the leave may be extended for the period required to complete the master's degree.

4. For a refresher course for workers with professional training who might thereby be enabled to contribute more to a phase of the child welfare program.

E. County Employee Agreement

A written agreement shall be signed by the employee and the county welfare director on a form prescribed by the SDSW which shall include the following provisions:

1. That the worker agrees to work one year (or for a period of time otherwise specified by the CWS Educational Leave Committee) immediately following the educational leave in the county welfare department in the child welfare program. If, however, no such employment is available in the county granting the leave, the worker shall agree to accept employment in any of the other Merit System counties, or to reimburse in full the amount of educational stipend received. In the event that the worker terminates employment in the county before the period of leave is satisfied, the worker shall agree to reimburse the remainder of the amount of the educational stipend as represented by the time due.

(Section Continued on Next Page)

800-18 (Continued) 800-18

COUNTY EMPLOYEE AGREEMENT
RELATING TO EDUCATIONAL LEAVE WITH STIPEND
UNDER THE CHILD WELFARE SERVICES PLAN

It is hereby agreed, this _____ day of _____, 194___, between the County of _____ and _____, an employee of the Welfare Department of _____ County that the following provision shall be met in respect to the educational leave:

1. That the educational leave shall be for attendance at _____ and shall begin _____ and end _____.

2. That the educational stipend shall be $_____ per month, paid to the employee, and shall be for tuition, special fees, books, living expenses while at school, and transportation to and from school.

3. That upon his return, the employee shall be entitled to all salary increments, vacation rights, etc., to which he normally would have been entitled had he remained on the job.

4. That the employee shall work _____ months in the county welfare department in the child welfare program immediately following this educational leave. If, however, no such employment is available in the county, the employee shall accept employment in any of the Merit System counties or shall reimburse in full the amount of educational stipend received. In the event the employee terminates employment in the county before the period of leave is satisfied, he shall reimburse the remainder of the amount of the educational leave stipend as represented by the time due.

5. That the employee shall submit to a review and evaluation of his performance at school by the CWS Educational Leave Committee, and further shall terminate his leave and return to the county if so recommended by the committee.

_____ Dated _____
Employee, County of _____

Approved by the Board of Supervisors of _____ County this _____ day of _____, 194___.

_____
Clerk of the Board of Supervisors of County of _____

800-18 (Continued) 800-18

G. Procedure

Applications for educational leave will be treated as follows:

1. The county welfare director shall initiate a CWS plan (i.e., narrative and contract) to provide CWS funds for an educational leave.

2. The county welfare director shall prepare a statement (this may be done before the County-State CWS agreement is made final) to the SDSW, attention of the CWS Educational Leave Committee, which shall include:

   (a) The recommendation referred to under the heading "County Employees Eligible", paragraph B;

   (b) The graduate school of social work and the period of time for which the leave is recommended, and evidence that the county employee meets the entrance requirements of the school of social work.

3. The SDSW shall make a preliminary review of the material submitted by the county welfare director and request more data of the field representative or the county welfare director if such is necessary for the committee to take action.

4. The secretary to the CWS Education Leave Committee shall bring to the attention of the committee those applications ready to be acted upon.

5. The committee shall:

   (a) Approve or disapprove an application;

   (b) Establish a priority rating for each application approved; and

   (c) Recommend an educational stipend to be granted the applicant.

6. The SDSW shall advise the county of the action taken by the CWS Educational Leave Committee.

7. The county welfare director shall submit to the SDSW, Attention: Secretary to the CWS Educational Leave Committee, a signed agreement (see agreement at end of this section).

8. The secretary shall maintain contacts with the schools and bring to the committee's attention matters requiring action. (W&IC 120)

(Section Continued on Next Page)

TITLE 22-CH 2

Certified as a Regulation (or
Regulations of the

Dept of Social Welfare
(Name of State Agency)

Phyllis Williams
(Signature)

Director
(Title)

2-9-79
(Date)

MYRTLE WILLIAMS
Director

STATE OF CALIFORNIA
DEPARTMENT OF SOCIAL WELFARE
616 K STREET
SACRAMENTO 14

February 4, 1949

FILED
in the office of the Secretary of State
of the State of California

FEB 11 1949

At 9 o'clock A M.
FRANK M. JORDAN, Secretary of State
By Robert T. Jordan
Assistant Secretary of State

125

ADOPTION MANUAL LETTER NO. 13

The attached revisions numbered 69 through 72 are to be entered in your copy of the Adoption Manual and the revision numbers canceled on the inside of the manual cover.

The revisions to Sections 2235-00 and 2340-00 and new Section 2335-00 were adopted by the Social Welfare Board on January 28, 1949, and are to be effective March 1, 1949.

Section 2235-00 as revised makes provision for the signing of a relinquishment in a county other than the county of the adoption agency.

Section 2335-00 is a new section which specifies the extent of the investigation when the recommendation is to be approval or denial or when the case is dismissed.

Section 2340-00 has been revised to add the specification that the agency will recommend denial if it finds that the child is not adoptable at the time or that its adoptability cannot be determined.

Sections 2310-00 and 2330-00 have been redone to eliminate duplication and to number items in more logical order.

2235-00 FORM OF CONSENT OR RELINQUISHMENT 2235-00

A. Consent

1. In every adoption where the parents' consent is necessary, either independent or stepparent, the consent must be on a form prescribed by the SDSW, except when an agency licensed by the SDSW is a party to the adoption. (Secs. 224m, 227, Civil Code)

2. The SDSW provides separate forms for stepparent adoptions, for independent adoptions, for use of parents residing in California, and for parents residing outside California.

3. The SDSW or county adoption agency may furnish the attorney with forms for use outside California, but the preferred procedure is for the SDSW or county adoption agency to secure such consents. It will accept a consent of a non-resident parent on a form other than that issued by the SDSW when the consent is properly executed and covers all essential points.

B. Relinquishment

1. There is no provision in the law regarding the form of the relinquishment which must be executed by the parent surrendering a child to an agency. Forms for use by adoption agencies are therefore prescribed by the SDSW.

2. When the parent resides outside the state at the time of relinquishing the child to an adoption agency in California, the relinquishment may be signed before a notary on a form prescribed by the SDSW and previously signed by an authorized official of the agency signifying the willingness of the agency to accept the relinquishment. (Sec. 224m of the Civil Code)

3. The parent may sign a relinquishment of a child to a county adoption agency in California while in another county. Such relinquishment may be signed before a representative of the SDSW or an adoption agency licensed by the SDSW on a form previously signed by an authorized official of the agency accepting the child, signifying its willingness to accept the relinquishment.

2225-00 CONSENT OF SDSW OR ADOPTION AGENCY 2225-00

A. In an Independent Adoption

1. In all cases in which the consent of the natural parent or parents is not necessary, the SDSW or county adoption agency shall, prior to the hearing of the petition, file its consent to the adoption with the clerk of the Superior Court of the county in which the petition is filed. (Sec. 226, paragraph 4, Civil Code)

   If the parent or parents whose consents are necessary die after signing consent but before the adoption hearing, the consent of the SDSW or county adoption agency will be necessary. The consent of the parent or parents may be filed with the court report as evidence of the parents' wishes, but the adoption cannot be granted legally on the basis of the parents' consent alone. See Sec. 2105-00 for procedure on filing the report.

2. If the father or mother of a child to be adopted is outside the State of California, his or her consent may be signed before a notary and in such case the consent of the SDSW will also be necessary. (Sec. 226, paragraph 8, Civil Code)

B. In an Agency Adoption (Relinquishment)

The agency to which the child has been relinquished and by which it has been placed must join in the petition for adoption and consent to the adoption. The consent may be included in the allegations of the petition. (See Form for Petition in Agency Adoption)

2230-00 CONSENTS NOT REQUIRED 2230-00

Although there is no legal requirement that consents shall be obtained from the following persons or agencies, it is desirable that they be interviewed and that a statement of their attitude towards the adoption be obtained:

1. The guardian of the person or of the estate of the child

2. The Juvenile Court when the child is a ward of the court

3. The children of the petitioners

In determining the suitability of the adoptive home consideration should be given to the attitudes of the prospective brothers and sisters and their acceptance of a new member to the family group and to the expressed opinion or reaction of the child or children fourteen years of age and over.

2245-00 (Continued) 2245-00

and, in such case, the consent of the SDSW will also be necessary but such consent shall not be necessary where the adoption is by a stepparent and one natural parent retains custody and control of the child. (Sec. 226, paragraph 8, Civil Code; AGO 7861, 8548, 9116)

When the consent is signed before a notary in another state it is necessary to have attached to the consent a certificate from the clerk of a court of record of the county or district where such acknowledgment is taken that the officer certifying to the same is authorized by law to do so, and that the signature of said officer to such certificate is his true and genuine signature. (Sec. 1189, Civil Code; AGO 7861)

Parent in Military Service: If the parent of a child to be adopted is in military service outside the State of California, his consent may be signed before his commanding officer in accordance with the provisions of Sec. 1183.5, Civil Code. (See Appendix 13--Proof and Acknowledgment of Instruments, Sec. 1183.5, Civil Code)

B. Relinquishment:

A relinquishment must be signed before two subscribing witnesses and acknowledged before an authorized official of the licensed adoption agency accepting the relinquishment.

Exception:

If the parent relinquishing the child is outside the State of California at the time of signing relinquishment, it may be signed before a notary public on a form prescribed by the agency and previously signed by an authorized official of the agency, signifying the willingness of the agency to accept the relinquishment. (Sec. 224m, Civil Code)

Parent in Military Service: If the parent of a child is in military service outside the State of California, his relinquishment may be signed before his commanding officer in accordance with the provisions of Sec. 1183.5, Civil Code. (See Appendix 13--Proof and Acknowledgment of Instruments, Sec. 1183.5 Civil Code)

See Section 2250-00 for instructions regarding witnessing signature by mark.

2240-00 CONTENT OF CONSENT OR RELINQUISHMENT 2240-00

A. Consent:

It is desirable, before filling out the consent form, to have at hand a copy of the petition for adoption and a copy of the child's birth certificate in order that complete and accurate information may be recorded on the consent before signature.

It is the responsibility of the agent taking the consent to see that the full names of the petitioners appear on the consent at the time the parent signs the forms. The information shall be made available to her and she shall not be prevented from reading the names on the consent. The agent shall not refuse to witness the consent even though the parent may not choose to read the names.

When the birth certificate and petition for adoption, or either of them, is not available at the time the consent is signed by the parent, it is advisable to have the parent fill in the information required.

B. Relinquishment:

Information on the relinquishment for the parents' signature may be taken from the child's birth certificate or the hospital record.

The name of the agency to which the child is being relinquished shall appear on the form when it is executed by the parent.

2245-00 WITNESSING CONSENT OR RELINQUISHMENT 2245-00

A. Consent

1. In an independent adoption the consent of the parent must be signed in the presence of an agent of the SDSW or of a licensed county adoption agency. (Sec. 226 Civil Code) It is recommended that the signature of the natural parent be witnessed by another person also, if possible.

2. In an adoption by a stepparent, where one natural or adoptive parent retains his or her custody and control of the child, the consent of either or both parents must be signed in the presence of a county clerk or probation officer of any county of the state. (Sec. 226, paragraph 7, Civil Code)

3. Exception:

Non-residents: If the father or mother of a child to be adopted is outside the State of California, at the time of signing consents, his or her consent may be signed before a notary or other person authorized to perform notarial acts,

(Section Continued on Next Page)

2310-00 (Continued) 2310-00

5. To prepare the Order of Adoption. (Sec. 227, Civil Code)

6. To have the case set for hearing in the Superior Court of the county in which the petition is filed.

7. Generally the attorney will appear in court with the petitioners. He may make court appearance for the petitioner in military service if it is impossible or impracticable for the petitioner to be present, when commissioned and empowered in writing so to represent him. (Sec. 227, Civil Code)

8. To file in the office of the county clerk the Order of Adoption. (Sec. 227, Civil Code)

9. To prepare for completion by the county clerk the Certificate of Adoption. (Sec. 10250, Health and Safety Code)

C. Data desired by Department or county adoption agency and requested from attorneys:

1. Copy of petition for adoption.

2. Address of petitioners.

3. Address of natural parents.

4. Certified copy of birth certificate of the child.

5. If necessary, other verifications such as marriage or death certificates or verification of dissolution of marriage.

2320-00 THE PETITION 2320-00

The petition for adoption should be reviewed and each statement checked to see that all necessary points are covered. If the investigation reveals discrepancies in the petition (such as petitioners' residence in another county or the omission of the signature of one petitioner), these should be discussed with the attorney immediately in order that the petition may be corrected or amended if necessary. (See Sec. 2100-00, Procedure for Filing Petition).

2300-00 NATURE OF THE INVESTIGATION 2300-00

"No hard and fast rules can be laid down as to what should be included in an adoption investigation. Certain general standards of procedure must serve as guides, but the plan for each investigation must depend on the circumstances involved. At no time should the procedure be permitted to become routine; otherwise the purpose of the investigation is likely to be obscured by the necessity for gathering routine information. Just as each child is an individual, so each adoption investigation must be planned individually."[1]

2310-00 CONTACTS WITH ATTORNEY 2310-00

The agent should communicate with the attorney during the progress of the investigation and should keep him informed of the status of the case, clearing any necessary points with him. If the petitioners do not have an attorney (the law does not require that petitioners be represented by an attorney), necessary points should be discussed with them.

A. It is the agent's responsibility:

1. To work closely with the attorney, as the petitioners' legal counsel, submitting to him for consideration any problem which may arise during the course of the investigation.

2. To discuss with the attorney any proposed extension of time or recommendation of denial.

3. To give the attorney a copy of any report or findings submitted to the court. (Sec. 226, Civil Code)

B. It is the attorney's responsibility:

1. To prepare and file the petition to the Superior Court of the county in which the petitioners reside. (Sec. 226, Civil Code)

2. To clear any legal barriers to the adoption.

3. To prepare (1) the agreement which the petitioners must execute or acknowledge in writing, stating that the child shall be treated in all respects as their lawful child, and (2) the consent of each spouse to the adoption of the child by the other spouse. (Secs. 223 and 227, Civil Code)

4. To prepare the consent to the adoption by a child over 12 years of age. (Sec. 225, Civil Code; see Appendices)

(Section Continued on Next Page)

[1] U. S. Children's Bureau (Publication No. 262, Mary Ruth Colby, Problems and Procedures in Adoptions, Washington, D. C., 1941, p. 68)

2335-00 EXTENT OF STUDY 2335-00

An adequate investigation will include not only the gathering of facts in regard to the adoption, but an analysis and evaluation of the facts obtained. The value of the recommendation will depend upon the validity of the findings of the agent making the investigation. Methods for obtaining and verifying information will vary with the individual case.

A. When the recommendation is to be approval, the investigation should be complete in every respect.

B. When the recommendation is to be denial, the investigation should be complete unless the child has been removed from the home of the petitioners. The agent should verify the fact that the child is no longer in the home before filing an incomplete report recommending denial.

C. When the petition is dismissed, the case should not be considered closed until the agent has verified the fact of the child's removal or has learned what plan is to be made for him. If the child is to remain in the home, the procedure outlined in Sec. 2380-00 for referral following recommendation of denial will apply.

2330-00 THE OBJECTIVES OF THE STUDY 2330-00

The objectives of the study are to determine:

A. Whether the parent's consent is voluntary, and given only after full consideration of possible satisfactory alternatives which might be possible through the child's family or through community resources.

B. Whether the child is legally free for adoption.

1. That the parent's consent, properly executed, is given where required.

2. That the parent's consent, where otherwise required is not necessary under provisions of Sec. 224, Civil Code.

C. Whether the child is suitable for adoption, from the standpoint of health, heredity, intelligence and personality.

D. Whether the petitioners' motives for adoption are sound.

E. Whether the petitioners are suitable adoptive parents for this child, consideration being given to age, health, emotional stability, harmonious home life, understanding of children, financial security, cultural level, and background.

F. Whether the child is well adjusted in the petitioners' home.

G. Whether adoption will provide opportunity for the full development of the child's potentialities.

H. Whether the child will be brought up in a religious faith acceptable to his natural parents if that is known. If the petitioners are not of the same religious faith as the child's parents, this subject should be discussed with the parents and their express approval should be given before their consent to the adoption is accepted by the SDSW.

2350-00 THE CHILD 2350-00

A. Birth Information

The agent shall obtain and review the birth certificate as soon as possible and shall compare the name, date, place of birth, and names of parents with information obtained from the parents, the petition and the questionnaire. Discrepancies shall be reconciled if possible and those which can not be reconciled shall be reported in the narrative and in the court report.

If the investigation discloses that the child's birth was not registered within one year after birth, the agent may accept in lieu of the birth certificate other verifications of the identity of the child, such as, a baptismal certificate, hospital record, other documentary evidence, or affidavits of persons having knowledge of the time and place of the birth of the child.

In such a situation the agent should suggest to the petitioners or their attorney that they wait until after the adoption is granted and file an application for delayed registration of birth. This should be filed in the new name of the child, giving the name of the adoptive parents as the natural parents and making no reference to the fact that an adoption has occurred.

If the child is foreign born, the agent shall obtain all possible information regarding entry into this country from the parents and/or the petitioners. (See Sec. 2690-00, Citizenship or Legal Entry)

B. Medical Reports and Examinations

The agent shall obtain reports from the physician attending the birth of the child and from the pediatrician, hospital, clinic, or other physician currently attending the child. (See Sec. 2655-00, Acceptable Medical Reports, and Sec. 2660-00, Health)

C. Psychometric and Psychiatric Reports

Psychometric and/or psychiatric examinations shall be required when observation of the child or information obtained regarding undesirable or questionable background indicates it, or when the child's background is unknown. (See Sec. 2680-00)

D. The Child's Development

The agent shall obtain the developmental history of the child (physical, mental, social) from natural parents, physicians, petitioners, institutions, school, etc., as indicated. If clearance is made with a school, utmost caution should be used in obtaining it and in discussing the information with the petitioners. When clearance seems advisable, it should be initiated only after discussion with the supervisor, The agent shall observe the child and talk with him and shall

(Section Continued on Next Page)

2340-00 FINDINGS AND RECOMMENDATIONS FOLLOWING THE STUDY 2340-00

A. The agency will recommend that the adoption be granted if its findings disclose:

1. That adoption is for the child's best interest and future welfare; or

2. That adoption will provide legal protection not otherwise available for the child, and for this reason should be recommended, although unfavorable recommendation might otherwise be made on basis of the facts disclosed; or

3. That favorable factors involved (taking into consideration the length of time the child has been in the home, and the probable damage to the child by removal from the home) outweigh other unfavorable factors in the situation and merit recommendation of the petition.

B. It will recommend that the petition be denied if its findings disclose:

1. That the child is not adoptable at the time or that its adoptability cannot be determined.

2. That adoption is not for the best interest of the child.

MAIN OFFICE
SACRAMENTO
616 K STREET
14

LOS ANGELES OFFICE
MIRROR BUILDING
145 SOUTH SPRING STREET
12

SAN FRANCISCO OFFICE
GRAYSTONE BUILDING
948 MARKET STREET
2

STATE OF CALIFORNIA

Department of Social Welfare

MYRTLE WILLIAMS
DIRECTOR

Sacramento 14
February 7, 1949

RECEIVED
SACRAMENTO, CALIF.
1949 FEB 11 AM 9 03
FRANK M. JORDAN
SECRETARY OF STATE
STATE OF CALIFORNIA

Hon. Frank M. Jordan
Secretary of State
Room 109, State Capitol
Sacramento, California

IN REPLY PLEASE REFER TO:

My dear Mr. Jordan:

Attached are three copies of the following regulations issued by the State Department of Social Welfare with Adoption Manual Letter No. 13.

These regulations were adopted by the State Social Welfare Board on January 28, 1949, pursuant to the powers conferred upon it by the Welfare and Institutions Code under Sections 103 and 114b and are filed in accordance with provisions of Section 11380 of the Government Code.

This material was previously filed with your office on January 28, 1949. It is now being sent to you in manual form.

Very sincerely yours,

Myrtle Williams

MYRTLE WILLIAMS, Director
Department of Social Welfare

468:b5
Attachments

TITLE 22 - CH. 2

MAIN OFFICE
SACRAMENTO
616 K STREET
14

LOS ANGELES OFFICE
MIRROR BUILDING
145 SOUTH SPRING STREET
12

SAN FRANCISCO OFFICE
GRAYSTONE BUILDING
948 MARKET STREET
2

STATE OF CALIFORNIA

Department of Social Welfare

MYRTLE WILLIAMS
DIRECTOR

Sacramento 14
February 21, 1949

Hon. Frank M. Jordan
Secretary of State
Room 109, State Capitol
Sacramento, California

FILED
in the office of the Secretary of State
of the State of California

FEB 23 1949

At 2 o'clock P. M.

FRANK M. JORDAN, Secretary of State

By Robert H. Jordan
Assistant Secretary of State

IN REPLY PLEASE REFER TO:

My dear Mr. Jordan:

Attached are three copies of the following regulations which are being filed in accordance with Section 11380 of the Government Code.

DEPARTMENT BULLETIN NO. 358 dated February 16, 1949
DEPARTMENT BULLETIN NO. 359 dated February 16, 1949

These regulations were issued on the above dates by the Director of the State Department of Social Welfare under authority of Section 4 of Article XXV of the California Constitution.

These regulations are to be effective immediately upon filing with the Secretary of State, since this has been found necessary for the immediate preservation of the public peace, health and safety or general welfare and that notice and public procedure thereon are impracticable, unnecessary or contrary to the public interest.

Very sincerely yours,

Myrtle Williams

MYRTLE WILLIAMS, Director
Department of Social Welfare

468:b5
Attachments

Certified as a Regulation (or
Regulations of the

Dept of Social Welfare
(Name of State Agency)

Myrtle Williams
(Signature)

Director
(Title)

2-21-79
(Date)

MYRTLE WILLIAMS
Director

Art XXV of the Calif. Constitution

STATE OF CALIFORNIA
DEPARTMENT OF SOCIAL WELFARE
616 K STREET
SACRAMENTO 14

February 16, 1949

FILED
in the office of the Secretary of State
of the State of California

FEB 23 1949

At 2 o'clock P M.

FRANK M. JORDAN, Secretary of State

By Robert E. Jordan
Assistant Secretary of State

DEPARTMENT BULLETIN NO. 359 (OAS, SB)

TO: COUNTY BOARDS OF SUPERVISORS
COUNTY WELFARE DEPARTMENTS
COUNTY AUDITORS

Subject: OAS and SB--Determination of Security Payments

Department Bulletins No. 347, 350, and 354 are hereby rescinded.

The following sections of the Manual of Policies and Procedures are rescinded in their entirety:

Sec. 155-25 (OAS) Total Need--Determination by Budget.
Sec. 155-26 (OAS) Form Ag 241, Budget Work Sheet and Instructions for Use.
Sec. 155-50 (OAS) Definition and Determination of Special Needs in OAS.
Sec. 156-25 (ANB) Definition and Determination of Needs in Excess of Basic Continuing Needs.
Sec. 156-30 (ANB) Procedure for Establishing Needs in Excess of Basic Continuing Needs in ANB.
Sec. 156-50 (ANB) Grant of Aid in Whole Dollars in ANB.

Statements regarding the use of the Budget Plan for OAS appearing in any other sections of the Manual are rescinded.

The need of applicants for and recipients of OAS and SB is that amount which is needed to meet the individual's total requirements as defined by the standards set forth herein.

The security payment is determined by subtracting the individual's income and the value of his currently used resources (other than casual income and inconsequential resources) from his need. The security payment plus the income shall not be less than $75 in OAS, and $85 in SB. When the need is in excess of $75 in OAS ($85 in SB) the amount of the security payment is determined by subtracting the income from the need. When the need is in excess of $75 ($85 in SB) and the difference is not in whole dollars the security payment shall be adjusted to the next higher whole dollar but in no event may the grant exceed $75 in OAS or $85 in SB. The amount of the security payment plus the income of the individual shall not exceed the total need except to the extent that the grant is adjusted to the next higher whole dollar.

A. Determination of Need

Since the law provides that the income together with the amount of the grant shall equal at least $75 in OAS, this amount is considered to cover continuing needs

common to all OAS recipients. In SB $85, the maximum payment, is considered to cover basic continuing needs common to all blind recipients. In addition to basic continuing needs the individual may have special needs arising out of impairment of health, physical handicap, etc. When special needs exist, the total need is determined by adding the amount allowed to meet the items of special need to the cost of basic needs ($75 in OAS and $85 in SB).

B. Basic Continuing Needs

Following are those basic continuing needs common to all recipients which are to be met on $75 a month in OAS and $85 a month in SB. The amount needed for each of the basic needs is indicated. These amounts constitute the "yardstick" to be used to determine the amount of special need which may exist for certain individual items; also to measure the value of any basic needs which are provided the individual without cost to him.

Following are those basic continuing needs common to all recipients which are presumed to be met on $75 a month in OAS, and $85 a month in SB:

1. Food--The normal amount and kind of food needed to maintain health and vigor. This is $28.50. If the recipient pays board and room, the cost thereof is the sum of the cost of the basic needs of food, housing, and utilities (see definition of Special Needs on page 5 of this bulletin). If circumstances require that the recipient eat his meals in restaurants, see Sepcial Needs on page 3 of this bulletin.

2. Housing--Adequate, suitable, sanitary housing in the locality chosen by the applicant or recipient. The amount of rent, no utilities included, is $15.

   When the rent includes utilities the cost is $21.30 ($15 for rent and $6.30 for utilities). See Special Needs on page 3 of this bulletin.

   When the recipient occupies his own home the cost of his housing is the sum of the monthly cost of prorated taxes, insurance, the required encumbrance payment (principal and interest) if any, $2 monthly allowance for minor repair and upkeep, and any net occupancy value. When the total of these costs exceeds $15, see Special Needs on page 3 of this bulletin.

3. Utilities--Light water, and fuel needed to maintain health and comfort. If the total amount required to meet the various utilities the recipient must use exceeds $6.30, see Definition of Special Needs on page 4 of this bulletin.

4. Clothing--Adequate, healthful clothing. A total of $6.20 a month is necessary to meet this need.

5. Household Maintenance and Replacements--The occasional replacement of small items of household equipment and/or supplies. The amount required to meet this need is $4.50.

6. Transportation--Carfare in the amount of $4.50 for social and ordinary shopping purposes, or gasoline used for such purpose. If there is extra transportation cost due to certain specific circumstances, see Definition of Special Needs on page 4 of this bulletin.

7. Incidentals--The usual expenditures for haircuts, toilet articles, recreation, including expenses necessary to maintain normal social contacts, etc., totalling $10.

8. Added Allowance for Blindness (SB only)--In addition to the basic needs set forth above, an allowance of $10 is required since the over-all cost of basic needs to a blind person is more than the cost to a person without such a handicap.

C. Definition and Determination of Special Needs

Special needs are not common to all recipients, but an individual recipient may have need for one or more of them. The following Special Needs shall be taken into consideration under the circumstances and within the monetary limits indicated.

1. Food--The amount by which the cost of special diet exceeds the cost of basic food ($28.50) represents special need, and is to be computed in accordance with the department's Special Diet Schedule.

   When the circumstances require that the recipient eat his meals in restaurants, the cost in excess of basic food shall be $21.40 a month.

2. Housing--When adequate housing is not available at less cost within the community, or when a health condition requires close proximity to a medical or shopping center, or when employment of the recipient or his spouse makes proximity to the place of employment a factor, special need exists as follows:

   When rent (or the recipient's share thereof), including no utilities, exceeds $15, the amount in excess thereof represents special need.

   When rent including utilities (or the recipient's share of the total cost thereof) exceeds $21.30 ($15 rent and $6.30 utilities), the amount in excess thereof represents special need.

   When the recipient occupies his own home and the monthly total cost of prorated taxes, insurance, the required encumbrance payment (principal and interest) if any, $2 monthly allowance for minor repair and upkeep, and any net occupancy value (or the recipient's share of the total cost thereof) exceeds $15, the amount in excess of $15 represents special need.

   If it is necessary to provide safe and healthful housing, or to minimize deterioration, the expense of occasional repairs represents special need until allowance has been made for the cost of such repairs, provided the cost does not exceed the minimum for which such repairs can be secured. The plan for payment agreed upon between the contractor or vendor and the recipient shall be recorded in detail.

3. Utilities--Special need exists when (1) the recipient's health is such as to require an abnormal consumption of one or more of the utility items, (2) the housing and/or equipment construction is such that an abnormal consumption occurs, (3) the utilities used include the more expensive items such as butane, crude oil, wood, and water when the rate in the community is unusually high. Allowance shall be made for special need, when the cost of various utilities used by the recipient under these circumstances exceeds $6.30 a month, up to a maximum of $5.70 a month. (The basic allowance of $6.30 plus $5.70 results in a $12 maximum allowance for utilities.)

4. Clothing--The cost of replacement of necessary clothing destroyed in a catastrophe such as fire, flood, etc., represents a special need.

5. Replacement of Worn-out Household Equipment--Household furniture or equipment may be inadequate or substandard to a point where replacement is necessary. This may be the situation of persons whose income, prior to receipt of OAS or SB, was insufficient to meet normal requirements. It also may result from a change in the living plan. When either of these circumstances exists, the actual cost of necessary replacement or of augmenting the present supply represents special need in an amount not to exceed the minimum for which the article or articles of quality and type required can be secured.

   Replacement of necessary household equipment destroyed in a catastrophe such as a fire, flood, etc., represents special need to the extent that such possessions were not covered by insurance.

6. Transportation--When there is transportation cost due to trips to the doctor, clinic, etc., or unusually long distance trips to the nearest shopping and business center, the additional transportation expense represents a special need, not to exceed $10.50 a month. The basic allowance of $4.50 plus $10.50 results in a $15 maximum for transportation.

7. Medical Care and/or Treatment Under Other Healing Arts

   (a) The need for care or treatment by a physician or surgeon, by the practitioner of any type of therapy, subject to licensing under the Business and Professions Code, by one giving treatment by prayer or spiritual means, or by other treatment recognized as a branch of the healing arts, represents a special need in the amount actually required to purchase such service.

   (b) Sanatorium or Rest Home Care--The cost of such care represents special need within certain limitations. Since board and room is a component part of sanatorium or rest home care the charge for such care includes this need, the cost of which is $55 in OAS and $65 in SB. After deducting the specified amount for the particular category from the total cost of the sanatorium or rest home care, the balance not to exceed $145 or $135 in SB represents special need.

(c) Medication--Prescriptions and proprietary drugs or other medication prescribed by practitioners of any of the healing arts and in the amount of the vendor's actual charge.

(d) Nursing Service--The need for nursing service when the physical condition of the recipient is such that such service is required and when the cost of such service does not exceed $145 in OAS and $135 in SB.

(e) Occasional Unusual Needs--The occasional or unusual needs which are due to accident or ill health, or which are necessary to preserve health and normal activity. These are:

(1) Dentures and dental work
(2) Hearing aids
(3) Eyeglasses
(4) Trusses or orthopedic appliances, wheel chairs, crutches, etc.
(5) Dressings and other sick room supplies.

It is expected that all counties will provide recipients of OAS and SB with such medical care as is customarily provided for other persons in similar circumstances.

8. Housekeeping Service--The cost of housekeeping service represents special need when the physical condition of the recipient is such that the service is required. This includes the cost of outside help to do occasional heavy cleaning, such as floors, woodwork, windows, etc., for persons who maintain their own household or live in a rented room where such service is not furnished without charge. The amount allowed for such service shall be based on the customary rate for such service in the community.

9. Laundry--The actual cost of laundry service, not to exceed the maximum of $5 a month, represents a special need when the recipient does not have facilities for doing the laundry himself or when his health or handicap prevents such activity.

10. Board and Room--If the recipient must pay board and room, and the charge for this item is in excess of $55 in OAS or $65 in SB, the excess represents special need provided board and room within the specified amounts is not available in the community.

11. Telephone--The cost of a telephone represents special need not to exceed $4.00 a month when a telephone is necessary because of a health condition, blindness, or isolation.

12. Special Needs of Blind Persons--The following items are the additional needs which may be necessary to effect physical, social, or economic adjustment of the blind recipient. When there is need for one or more of these items the actual cost thereof represents a special need.

(a) Personal services, such as a personal guide, reader, etc.

(b) Guide dog, and/or maintenance therefor. Experience with this type of need indicates that an allowance of $29.00 a month for the maintenance of a guide dog (cost of food, veterinarian fees, etc.) is reasonable; and this sum may be used in lieu of individual determination in each instance.

(c) Radio phonograph and/or radio phonograph repairs.

(d) Talking Book and/or Talking Book repairs.

(e) Typewriter and/or Braille writer.

(f) Artificial eyes.

(g) Special appliances for the blind (including purchases and/or repair) such as white canes, watches, Braille slates.

(h) Clerical assistance to supply essential reading and writing service.

13. Required payments on a debt represent special need when the debt is secured by the recipient's furniture or some other item of personal property which is a current necessity. The liquidation of debts not so secured represent a special need if the debt was for a bona fide special need and was incurred while a recipient of aid. Payments on an unsecured debt incurred while not a recipient of aid shall not be considered a current need.

D. Verification of Special Needs

Emphasis must be placed upon recognition of special needs which exist. Allowance shall be made for special needs in determining the total need of the applicant or recipient on the basis of his written or oral statement when the amount needed to meet the special need appears reasonable. Verification is required when the cost as reported by the recipient appears to be excessive.

In those instances where there is income including the value of currently used resources, there shall be recording in the case record concerning discussion with the recipient as to any special needs he may have and the amount required to meet such special needs; also the determination with regard to the establishment of need in excess of basic continuing needs.

12. Special Needs of Blind Persons--The following items are the additional needs which may be necessary to effect physical, social, or economic adjustment of the blind recipient. When there is need for one or more of these items the actual cost thereof represents a special need.

(a) Personal services, such as a personal guide, reader, etc.

(b) Guide dog, and/or maintenance thereof. Experience with this maintenance indicates that an allowance of [illegible] a month for the maintenance of a guide dog in the form of food, [illegible] [illegible] may be used in lieu of individual determination in each instance.

(c) Radio phonograph and/or radio phonograph repairs.

(d) Talking Book and/or Talking Book repairs.

(e) Typewriter and/or Braille writer

(f) Artificial eyes.

(g) Special appliances for the blind (including purchases and/or repairs) such as white canes, watches, Braille slates.

(h) Clerical assistance to supply essential reading and writing service.

13. Required payments on a debt represent special need when the debt is secured by the recipient's furniture or some other item of personal property which is a current necessity. [illegible] Payments on an unsecured debt incurred while not a recipient of aid shall not be considered a current need.

D. Verification of Special Needs

Allowance shall be made for special needs [illegible] the cost as reported by the recipient appears to be excessive.

[illegible] determination with regard to the establishment of need in excess of basic continuing needs.

E. New Applications.

The provisions of this bulletin govern the determination of need and the amount of the security payment on all new applications, reapplications and restorations which have not yet been acted upon when the grant is effective for any month subsequent to December 31, 1948.

F. Current Cases

The provisions of this bulletin govern the adjustment to be made on current cases regardless of the month the payment becomes effective, and all necessary grant adjustments shall be made not later than April 1, 1949.

If the amount of security paid for January, February or March was correct according to the budget schedule used to compute the payment made for those months, no overpayment shall be considered to have occurred even though the amount of security paid was greater than the amount the recipient would have received had the provisions of this bulletin been in effect.

If in the course of making adjustment on current cases it develops that the recipient had special needs as defined herein in January, February or March which were not taken into consideration in determining the payment for those months, or adjustment for those months is necessary for other reason such as a change in the amount of income, any retroactive security due on the basis of the provisions of this bulletin shall be allowed

Adjustments on current cases may be reported by individual Notice of Change or by use of a list.

If lists are used to report the change (either increase or decrease) they must be submitted in duplicate and the cases must be listed in numerical order according to state number. The following statement must appear at the beginning of each list:

The security payments of the following recipients of OAS (SB) are adjusted effective (insert date) on the basis of their total need determined by adding the cost of special items of need to $75 ($85 in SB).

State Number	Name	Amt. of Grant From Date of Change	Total Income Other Than Grant	Source and Amount of Income	Total Need

The certification of the local Deputy Director SDSW shall be affixed on the last page of the list as follows:

> I certify that the persons listed on pages ___ through ___ are eligible to OAS (SB) in the amount set forth opposite each name, that supporting evidence is in the case record where it is open to inspection by duly authorized State and federal representatives, and I authorize payments to be made to said persons in the amounts specified.

_____ Deputy Director SDSW

_____ Date

G. Value of Contributions in Kind

The following revision to the ruling stated in Manual Section 152-90, Value of Contributions in Kind, is effective immediately for OAS and SB.

The value placed upon rent, utilities, food, or other items of support contributed in kind to an applicant or recipient shall not be in excess of an amount which will permit the recipient to meet his other needs such as incidentals, transportation, etc. The value placed upon free rent shall not exceed $15. The value placed on free rent and utilities shall not exceed $21.30 ($15 for rent and $6.30 for utilities). The value placed on free food shall not exceed $28.50. When free room and board are provided the recipient ordinarily has no expense for household maintenance and replacements, in which case the value of the free room and board shall be the sum of the values placed upon free food, free rent, and utilities, and household maintenance and replacements ($4.50). If the board and room does not include all of these items the total value of the items which are included shall be regarded as the value of the board and room.

Very sincerely yours,

Myrtle Williams

MYRTLE WILLIAMS, Director
Department of Social Welfare

Certified as a Regulation (or Regulations of the

Dept of Social Welfare

(Name of State Agency)

Myrle Williams

(Signature)

Director

(Title)

2-21-49

(Date)

art III of the Calif Const.

Myrtle Williams
Director

STATE OF CALIFORNIA
DEPARTMENT OF SOCIAL WELFARE
616 K STREET
SACRAMENTO 14

February 16, 1949

FILED
in the office of the Secretary of State
of the State of California

FEB 23 1949
At 2 o'clock P M.
FRANK M. JORDAN, Secretary of State
By Robert Y. Jordan
Assistant Secretary of State

DEPARTMENT BULLETIN NO. 358 (SB)

TO: COUNTY BOARDS OF SUPERVISORS
COUNTY WELFARE DEPARTMENTS
COUNTY AUDITORS

Subject: Real Property--
Security for the Blind

Effective immediately Manual Sections 132-00 and 132-03 and Department Bulletin No. 334 are amended insofar as their definition of real property in Security for the Blind is concerned.

In Security for the Blind, security shall not be granted any person who owns real property the assessed valuation of which, less all encumbrances of record, exceeds $3500; nor shall security be granted to any person who together with his spouse owns real property when the county assessed valuation, less all encumbrances of records, exceeds $3500. If the spouse of the applicant or recipient owns separate real property, that ownership shall not affect the eligibility of the blind applicant or recipient.

Example 1: The spouse of a recipient of Security for the Blind owns as her separate property a home clear of encumbrance, the county assessed valuation of which is $4600. The recipient continues eligible insofar as real property is concerned because he has no interest in that property.

Example 2: An applicant for Security for the Blind and his spouse own real property, in community, free of encumbrances, the total county assessed valuation of which is $3600. The applicant is ineligible because the assessed valuation of the property holdings in which he has an interest with his spouse exceeds $3500.

Very sincerely yours,

Myrtle Williams

MYRTLE WILLIAMS, Director
Department of Social Welfare

Certified as a Regulation (or Regulations of the

Dept of Social Welfare

(Name of State Agency)

Myrtle Williams

(Signature)

Director

(Title)

2-21-49

(Date)

TITLE 22 - CH. 2

MAIN OFFICE
SACRAMENTO
616 K STREET
14

LOS ANGELES OFFICE
MIRROR BUILDING
145 SOUTH SPRING STREET
12

SAN FRANCISCO OFFICE
GRAYSTONE BUILDING
948 MARKET STREET
2

STATE OF CALIFORNIA

Department of Social Welfare

MYRTLE WILLIAMS
DIRECTOR

Sacramento 14
February 21, 1949

Hon. Frank M. Jordan
Secretary of State
Room 109, State Capitol
Sacramento, California

FILED
in the office of the Secretary of State
of the State of California

FEB 24 1949

At 1:45 o'clock P. M.

FRANK M. JORDAN, Secretary of State

By Robert V. Jordan
Assistant Secretary of State

RECEIVED
SACRAMENTO, CALIF.
1949 FEB 24 PM 1 42
FRANK M. JORDAN

IN REPLY PLEASE REFER TO:

My dear Mr. Jordan:

Attached are three copies of the regulations issued by the State Department of Social Welfare:

DEPARTMENT BULLETIN NO. 341-A (Fiscal) (Emergency Regulation)
DEPARTMENT BULLETIN NO. 357 (Fiscal) (Emergency Regulation)
DEPARTMENT BULLETIN NO. 360 (Fiscal) (Emergency Regulation)

These regulations were issued by the State Department of Social Welfare pursuant to the powers conferred upon it by the Welfare and Institutions Code under Sections 103.5, 114b, 115, 116, 1560, 1622, 2302, 3460 and are being filed in accordance with Section 11380 of the Government Code.

These regulations are to be effective immediately upon filing with the Secretary of State, since this has been found necessary for the immediate preservation of the public peace, health and safety or general welfare and that notice and public procedure thereon are impracticable, unnecessary or contrary to the public interest.

Very sincerely yours,

Myrtle Williams

MYRTLE WILLIAMS, Director
Department of Social Welfare

468:b5
Attachments

WIC 1146, 115, 116, 1560, 3460

MYRTLE WILLIAMS
Director

STATE OF CALIFORNIA
DEPARTMENT OF SOCIAL WELFARE
616 K STREET
SACRAMENTO 14

February 17, 1949

FILED
in the office of the Secretary of State
of the State of California

FEB 24 1949
At 1:45 o'clock P. M.
FRANK M. JORDAN, Secretary of State
By Robert T. Jordan
Assistant Secretary of State

DEPARTMENT BULLETIN NO. 341-A (Fiscal)

TO: COUNTY BOARDS OF SUPERVISORS
COUNTY WELFARE DEPARTMENTS
COUNTY AUDITORS

Subject: Reporting of Administrative Costs

Department Bulletin No. 341 (Fiscal) remains in full effect. The following amplifications are effective for the December 1948 claim and claims for subsequent months.

1. ESTIMATES

a) Aged and Blind Security and Administration

Counties shall submit monthly estimates in duplicate to the SDSW not later than the tenth day of the month immediately preceding the month for which the estimate is filed.

b) ANC and APSB--Aid and Administration

The SDSW no longer notifies counties in advance of the due date of quarterly estimates for ANC and APSB.

These estimates are due in Sacramento by the fifteenth day of the second month immediately preceding the quarter for which the estimates are filed. Example: The estimates for the quarter ending June 30, 1949, are due in Sacramento by April 15, 1949.

c) Supplemental Estimates for Aged and Blind Security and Administration

Every effort should be made by each county to identify and estimate properly its needs for the coming month. These needs should be reflected on the main estimate filed for the month. Supplemental estimates are to be filed when the county finds it has insufficient funds on hand to handle the current month's payment and it is not yet time for the county to file the estimate for the subsequent month.

d) Approval for Board of Supervisors

Many county boards of supervisors have granted authorization to an individual other than a board member to approve monthly

estimates for Aged and Blind Security. It is necessary that a copy of the resolution (s) be filed with the SDSW prior to submitting the documents affected and it is further required that the person authorized to sign for the board do so in the space provided even though his signature may also appear as the person requesting funds or authorizing payments.

2. INVENTORY RECORDS

Department Bulletin No. 341 transmitted to the counties Form DFA 64E, Inventory Record of Property Acquired From State Funds.

This inventory record shall accompany each monthly administrative expense claim where the claim includes articles which are not readily expendable and for which $5.00 or more was paid for each article or item. The limitation of $5.00 is based on the gross amount paid, not merely upon the amount of state participation.

By "expendable" items the Department refers to stationery, pencils publications, forms, ink, etc. These items do not have to be reported on Form DFA 64E

"Non-Expendable" items and which shall be reported each month on Form DFA 64E are those items costing $5.00 or more each of which the State is paying either all or a portion (no matter how minor) of the cost and include staplers, desk trays, desk lamps, desk sets, paper punchs, desks, chairs, typewriters, etc.

Paragraph 6, Item 7, page 5 of Department Bulletin No. 341 states that, "Counties will itemize monthly on Form DFA 64E all personal property expenditures during the month which cost $5.00 or more per item. The possession, control of, and such title as the county may have in, any property purchased for use of the county and recorded on this form shall, upon termination of the agreement between the county and the state, be surrendered to the state." This last sentence is erroneous to the extent that the county will surrender to the State only those items reported on Form DFA 64E which were purchased entirely from state funds. Negotiation will be undertaken between the State and county at a later date as to the disposition of those articles reported on Form DFA 64E in which the State has only partial title or equity due to the fact that the State did not pay the full cost of the article. The reporting of items on this form does not in any sense constitute a waiver by the county of its equity in any items so reported.

3. REPAIRS AND ALTERATIONS AND RENT OF COUNTY PROPERTY

Due to the varied and complex problems involved regarding these subjects, a separate bulletin is being written.

4. ADMINISTRATION, Preparation of Claims and Request for Approval of Expenditures in Excess of $500.00 per Item.

a) Preparation of Claims

A supply is being forwarded of Forms DFA 64, Salaries and Wages Worksheet and DFA 64A, Maintenance and Operation and Capital

Outlay Worksheets, revised in conformity with claim procedure as outlined in Department Bulletin No. 341 (Fiscal).

The aged eligible columns of the worksheets are to be used for all charges allocable to OAS eligible to federal participation. The aged ineligible columns are to be used for charges allocable to the 63-64 age group and other federally ineligible cases.

The blind eligible columns are to be used for all charges allocable to Security for the Blind cases eligible to federal participation. The blind ineligible columns are to be used for all charges to the APSB program. The State does not participate in administrative expense for the APSB program.

Separate worksheets (both DFA 64 and DFA 64A) are to be used for each month to which charges are accrued on the affidavits. When charges to a prior month are made, the salary and wage distribution to program for that month shall be used in allocating any joint or overall program charges for Maintenance and Operation and Capital Outlay items. This salary and wage distribution, taken from the prior month claim, shall be inserted on the proper supplemental worksheet to indicate the basis for allocation.

In order that all counties may be familiar with the new claim procedure, one sample set of completed affidavit forms (Ag, Bl, CA 807) along with worksheets (DFA 64, 64A, 64B, and 64E) is being sent to each county welfare director.

b) Expenditures in Excess of $500.00 per item

Counties must report on Form DFA 64E all expenditures for non-expendable equipment costing over $5.00 per item as outlined in Section 2 above. Prior approval of the SDSW is not required (a) when the individual item is less than $500.00 or (b) the item exceeds $500.00 but was included in the county budget for the fiscal year 1948-49.

Prior approval must be secured for all expenditures of more than $500.00 per item when the item was not included in the budget for the year 1948-49. When reporting such expenditures on Form DFA 64E, be sure to indicate in the Remarks column if the item was included in the 1948-49 county budget and prior approval of the SDSW was not secured.

c) Purchases of Expendable Supplies and Equipment

In ordering expendable supplies and equipment, such as stationery, fuel, forms, office supplies, etc., care should be taken not to overstock and to keep purchases within a reasonable limit. Field review will be made to determine whether purchases have been commensurate with current need.

Office vehicles, review in conformity with state procedure as outlined in Department Bulletin No. 323 (Revised).

The same eligible volumes of the vehicles are to be used for all charges allowable to the activity on Federal participation. The same eligible volumes are to be used for charges allowable to the State, the county and other federally participating units.

The total eligible volumes are to be used for all charges allowable to County for the total state eligible to Federal participation. The total eligible volume are to be used for all charges to the AFDC program. The State then sets percentages to administrative expense for the AFDC program.

Separate statements (both OPA 6A and OPA 6A1) are to be used for each month to which charges are charged on the affidavits. When charges to a prior month are made, the salary and wage distribution is required for that month which shall be used in allocating any joint or general overhead charges for performance and operation and related costs among items. This salary and wage distribution, prior to from the prior month claim, shall be treated on the current expenditure reported to include the basis for allocation.

In order that all counties may be familiar with the new claim procedure, we enclose one of completed affidavit forms (OPA 6A) along with vouchers (OPA 6A, 6A1, and 6A2) to bring this to each county welfare director.

b) Expenditures in Excess of $10,000 per Item

Counties must report on Form OPA 6A1 all expenditures for nonexpendable equipment totaling over $10,000 per item on authorized in Section 2 above. Prior approval of the SWB is not required (a) when the individual item is less than $10,000 or (b) the item amount $10,000 but was included in the county budget for the fiscal year 1964-65.

Prior approval must be secured for all expenditures of more than $500.00 per item when not included in the budget for the year 1964-65. When requesting such expenditures on Form OPA 6A1, be sure to indicate in the remarks column if the item was included in the 1964-65 County budget and prior approval of the SWB was not secured.

c) Purchase of Expendable Supplies and Equipment

In ordering expendable supplies and equipment, such as stationery, fuel, forms, office supplies, etc., care should be taken not to overstock and to keep purchases within a reasonable limit. Field review will be made to determine whether purchases have been commensurate with current need.

Department Bulletin No. 324-A (Revised)
Page 4

5. TIME RECORDING AND TRAVEL

A separate bulletin (No. 357) was issued, notifying the counties that the Federal Government is again requiring that time be recorded to the nearest five minutes on the employees' daily time record, Form DFA 42. All manual and bulletin provisions for 30-minute and 15-minute daily time recording are thereby rescinded. Any special time study plans previously approved are also amended by this regulation to provide for recording on the daily form to the nearest five minutes.

Department Bulletin 341 outlined in detail the method of preparing supplemental administrative expense claims for prior months. It was stated that supplemental claims must be filed according to the month to which the expenditures are chargeable. With specific regard to expenditures for salaries and wages, the original allocation of the prior month's joint and overall charges shall not be changed each time a supplemental claim is prepared to cover a payment of back salary or a previous underclaim, unless the payment of back salaries or the amount of the underclaim is sufficiently large to result in a material change in the original allocation of joint and overall charges.

Expenditures for travel should be charged to the month in which the travel was made as such expenses are readily segregable. If, however, a travel voucher includes expenditures for more than one month, the county should not attempt to make proration. In such a case, the expenditure should be charged to the month in which paid.

Very sincerely yours,

Myrtle Williams

MYRTLE WILLIAMS, Director
Department of Social Welfare

Certified as a Regula n (or
Regulations) of the

Dept of Social Welfare
(Name of State Agency)

Myrle Williams
(Signature)

Director
(Title)

2-21-49
(Date)

Myrtle Williams
Director

W&IC 103.5, 116

STATE OF CALIFORNIA
DEPARTMENT OF SOCIAL WELFARE
616 K STREET
SACRAMENTO 14

February 11, 1949

DEPARTMENT BULLETIN NO. 357 (Fiscal)

TO: COUNTY WELFARE DEPARTMENTS
COUNTY BOARDS OF SUPERVISORS
COUNTY AUDITORS

Subject: Time Recording

Manual Section 645-76 is amended to provide: "Time is recorded by these employees on the daily time record to the nearest five minutes and is totalled by program at the end of the day and the totals are then posted to the monthly time record."

This supersedes the 15-minute time recording unit set farth in Bulletin 341.

Very sincerely yours,

Myrtle Williams

MYRTLE WILLIAMS, Director
Department of Social Welfare

FILED
in the office of the Secretary of State
of the State of California

FEB 24 1949

At 1:45 o'clock P. M.

FRANK M. JORDAN, Secretary of State

By Robert T. Jordan
Assistant Secretary of State

Certified as a Regulation (or Regulations) of the

Dept of Soc. Welfare

(Name of State Agency)

Myrtle Wilkinson

(Signature)

Director

(Title)

2-21-49

(Date)

Certified as a Regulation (or Regulations) of the

Dept of Soc. Welfare

(Name of State Agency)

Myrtle Williams

(Signature)

Director

(Title)

2-21-49

(Date)

WIC 1622, 2302

Myrtle Williams
Director

STATE OF CALIFORNIA
DEPARTMENT OF SOCIAL WELFARE
616 K STREET
SACRAMENTO 14

February 17, 1949

FILED
in the office of the Secretary of State
of the State of California

FEB 24 1949
At 1:45 o'clock P M.
FRANK M. JORDAN, Secretary of State
By Robert T. Jordan
Assistant Secretary of State

DEPARTMENT BULLETIN NO. 360 (FISCAL)

TO: COUNTY BOARDS OF SUPERVISORS
COUNTY WELFARE DEPARTMENTS
COUNTY AUDITORS

Subject: Revised Procedures for Filing Claims for Administrative Expense for the Aged and Children's Boarding Home Licensing and Inspection Programs.

It is now necessary to report expenditures for administration of Aged and Children's Boarding Home Licensing and Inspection programs, in which the State participates, on a monthly accrual basis. The following rules in filing claims apply:

1. Administrative Expenses (including Salaries & Wages, Maintenance and Operation and Capital Outlay) are to be claimed only as paid by county warrant or otherwise incurred by intra-county billing.

2. Salaries & Wages are to be charged to the month in which the services are rendered.

3. Maintenance and Operation and Capital Outlay are to be charged either

   (a) to the month in which the benefit of the expenditure was received, examples: rent, maintenance and services in lieu of rent, utilities, telephone and telegraph and other contractual services, travel, or

   (b) to the month in which paid by county warrant or incurred by intra-county billing when the month in which the benefit was received cannot be determined, examples: automobiles, office equipment, office supplies, fuel, stationary, forms, repairs and alterations and contractual service charges or other charges covering fractions of two or more months.

To effect this distribution by accrual month, Administrative Expense affidavit forms BHA 80 and BHC 80 have been revised (see samples attached). The revised forms are to be used to claim for February, 1949 and subsequent months. Only one affidavit is to be filed each month for each program. The current month column is to be used for all expenditures paid and accruing to that month in accordance with the above rules. The prior month columns (as needed) are to be used for expenditures reported during the current month but accruing to prior months. Separate worksheets may be used for each month involved. An "All-program" distribution for a prior month must be made by using that month's program ratios.

Examples:

1. Rent is paid in January for the months of November, December and January. Charge to each of the months involved that portion of the rent allocable to the program.

2. Office supplies and stationary are paid in December. Charge to December.

3. Typewriters are received in December and paid by warrant dated in January. Charge allocable amount to January.

4. Salaries and Wages for January are paid by warrant on February 3 and claim for January is filed February 10. Charge to January.

5. Salaries and Wages for back pay earned in October are paid in January. Charge to October.

While charges of Salaries & Wages to prior months will affect the net allocation ratios for those months on which overall and joint program distribution is based, there need be no recalculation of such ratios except in such rare cases as materially affect the original distribution.

Particular care should be taken that the number of valid licenses (Item 1) is stated correctly for each month involved. In the event the number originally reported is reduced or augmented by claim correction, the revised number should be entered. The same is true for administrative expense previously claimed (Item 3). The total of amounts previously claimed as modified by claim corrections should be entered for the respective months involved.

It is to be noted that in addition to the signature of the Executive Officer, the affidavits herceforth require the certification of the county auditor (or other fiscal officer) and the signature of the Chairman of the County Board of Supervisors (or if City, of the Mayor).

Other rules and regulations as outlined in Sections 645-00 through 646-99 of the Manual of Policies and Procedures and in Chapter IX of the Boarding Home Manual not in conflict with the above, continue in effect as heretofore.

Very sincerely yours,

Myrtle Williams

MYRTLE WILLIAMS, Director
Department of Social Welfare

State of California

Forward two copies to
State Department of Social Welfare
Sacramento, California

AFFIDAVIT--MONTHLY CLAIM FOR REIMBURSEMENT FOR INSPECTION AND LICENSING SERVICES RENDERED UNDER SECTION 2302 OF THE WELFARE AND INSTITUTIONS CODE

BOARDING HOMES FOR THE AGED

From _____ Accredited Agency

For the Month of _____, 19____ _____ Fiscal Year
(For State Use Only)

	CURRENT MONTH	PRIOR MONTH _____ 19	PRIOR MONTH _____ 19	PRIOR MONTH _____ 19
1. Number of Valid Licenses in effect on first Day of Month (Total from BH 83)	No_____	No_____	No_____	No_____
2. Basis for State Participation (No. of Valid Licenses Item 1 x $4.00)	$_____	$_____	$_____	$_____
3. Administrative amounts stated on Affidavits filed previously. (From Form DFA 64A of claims previously filed)		$_____	$_____	$_____
4. Net Residue available to support this claim (Item 2 minus Item 3 if Item 2 is greater; otherwise enter zero)	$_____	$_____	$_____	$_____
5. Amount reported this month for Aged Boarding Home Administration (From Form DFA 64A, filed for Current Month)	$_____	$_____	$_____	$_____
6. Amount due from State Funds (That portion of Item 5 not in excess of Item 4)	$_____	$_____	$_____	$_____
7. Total Amount due from State Funds (Sum of amounts Item 6)		$ _____		

FOR STATE USE ONLY

8. State Share of Adjustments	$_____	$_____	$_____	$_____
9. Adjusted Amount Due from State Funds	$_____	$_____	$_____	$_____
10. Total Adjusted Amount Due from State Funds (Sum of Amounts Item 9)				_____

STATE OF CALIFORNIA
)SS
COUNTY OF _____)

I, _____, being duly sworn, depose and say: That I am the executive officer of the agency accredited and approved by the State Department of Social Welfare to perform inspection and licensing functions under Chapter II, Division 3 of the Welfare and Institutions Code. That I have fully complied with the law, rules and regulations governing these inspection and licensing functions. That the licensees whose names appear on the report hereto attached held valid licenses on the first day of the month for which reimbursement is hereby claimed.

Subscribed and sworn to before me this _____ day

of _____, 19 _____

_____
Title _____

_____
Executive Officer of the Accredited Agency

Title _____

Approved by _____
Chairman, County Board of Supervisors
(or, if city, by Mayor)

I HEREBY CERTIFY, that warrants have been issued, or expenditures otherwise incurred in settlement of the Administrative Expenses reflected in this affidavit.

_____
Signature of County Auditor or other fiscal Officer

FOR STATE USE ONLY

The above claim has been verified against supporting documentary evidence and subject to field audit is approved for payment.

_____ Date _____
Supervisor, Bureau of Claims Accounting

Claim Number	Date Released	Signature

Form BHA 80, Revised January 1949

State of California

Forward two copies to
State Department of Social Welfare
Sacramento, California

AFFIDAVIT--MONTHLY CLAIM FOR REIMBURSEMENT FOR INSPECTION AND LICENSING SERVICES RENDERED UNDER SECTION 1622 OF THE WELFARE AND INSTITUTIONS CODE

BOARDING HOMES FOR CHILDREN

From _____ Accredited Agency

For the Month of _____, 19___ _____ Fiscal Year
(For State Use Only)

	CURRENT MONTH	PRIOR MONTH _____ 19	PRIOR MONTH _____ 19	PRIOR MONTH _____ 19
1. Number of Valid Licenses in effect on first day of Month (Total from BH 83)	No _____	No _____	No _____	No _____
2. Basis for State Participation (No. of Valid Licenses Item 1 x $4.00)	$ _____	$ _____	$ _____	$ _____
3. Administrative amounts stated on Affidavits filed previously (From Form DFA 64A, of claims previously filed)		$ _____	$ _____	$ _____
4. Net Residue available to support this claim (Item 2 minus Item 3 if Item 2 is greater; otherwise enter zero)	$ _____	$ _____	$ _____	$ _____
5. Amount reported this month for Children's Boarding Home Administration (From Form DFA 64A, filed for Current Month)	$ _____	$ _____	$ _____	$ _____
6. Amount Due from State Funds (That portion of Item 5 not in excess of Item 4)	$ _____	$ _____	$ _____	$ _____
7. Total Amount due from State Funds (Sum of amounts Item 6)		$ _____		

FOR STATE USE ONLY

8. State Share of Adjustments	$ _____	$ _____	$ _____	$ _____
9. Adjusted Amount Due From State Funds	$ _____	$ _____	$ _____	$ _____
10. Total Adjusted Amount Due from State Funds (Sum of Amounts Item 9)				$ _____

STATE OF CALIFORNIA)
COUNTY OF _____) SS

I, _____, being duly sworn, depose and say: That I am the executive officer of the agency accredited and approved by the State Department of Social Welfare to perform inspection and licensing functions under Chapter I, Part 3, Division 2 of the Welfare and Institutions Code. That I have fully complied with the law, rules and regulations governing these inspection and licensing functions. That the licensees whose names appear on the report hereto attached held valid licenses on the first day of the month for which reimbursement is hereby claimed.

Subscribed and sworn to before me this _____ day

of _____, 19_____

_____
Title _____

_____
Executive Officer of the Accredited Agency

Title _____

Approved by _____
Chairman, County Board of Supervisors
(or, if city, by Mayor)

I HEREBY CERTIFY, that warrants have been issued or expenditures otherwise incurred in settlement of the Administrative Expenses reflected in this affidavit.

_____
Signature of County Auditor or other Fiscal Officer

FOR STATE USE ONLY

The above claim has been verified against supporting documentary evidence and subject to field audit is approved for payment.

_____ Date _____
Supervisor, Bureau of Claims Accounting

Claim Number	Date Released	Signature

Form BHC 80, Revised January 1949